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| Fill in this information to identify your case: |                                 |                                 |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                 |
| NORTHERN DISTRICT OF ILLINOIS                   | _                               |                                 |
| Case number (if known)                          | _ Chapter you are filing under: |                                 |
|   | ☐ Chapter 7                     |                                 |
|   | ☐ Chapter 11                    |                                 |
|   | ☐ Chapter 12                    |                                 |
|   | Chapter 13                      | Check if this an amended filing |

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself  |  |   |   |
|-----|---|--|---|---|
|     |   | About Debtor 1:                          |   | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your full name  |  |   |   |
|     | Write the name that is on   | Karen                                    |   |   |
|     | your government-issued picture identification (for example, your driver's license or passport).                   | First name                               |   | First name                                    |
|     |   | Middle name                              |   | Middle name                                   |
| ic  | Bring your picture  | Castle                                   |   |   |
|     | identification to your meeting with the trustee.  | Last name and Suffix (Sr., Jr., II, III) | _ | Last name and Suffix (Sr., Jr., II, III)      |
|     |   |  |   |   |
| 2.  | All other names you have used in the last 8 years   | Karen Castle-Millwood                    |   |   |
|     | Include your married or maiden names.   |  |   |   |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-3808                              |   |   |

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Debtor 1 Karen Castle

|  |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |  |  |  |
|--|---|---|--|--|--|--|
| 4. Any business names and<br>Employer Identification<br>Numbers (EIN) you have<br>used in the last 8 years |   | ■ I have not used any business name or EINs.  | ☐ I have not used any business name or EINs.   |  |  |  |
|  | Include trade names and doing business as names | Business name(s)  | Business name(s)   |  |  |  |
|  |   | EINs  | EINs   |  |  |  |
| 5.   | Where you live                                  | 4951 S. Luna Avenue   | If Debtor 2 lives at a different address:  |  |  |  |
|  |   | Chicago, IL 60638 Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code   |  |  |  |
|  |   | Cook  |  |  |  |  |
|  |   | County  | County   |  |  |  |
|  |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |  |  |  |
|  |   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |  |  |  |
| 6.   | Why you are choosing this district to file for  | Check one:  | Check one:   |  |  |  |
|  | bankruptcy                                      | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |  |  |  |
|  |   | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)   | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)  |  |  |  |
|  |   |   |  |  |  |  |

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| ar       | Tell the Court About  | Your B  | ankruptcy Ca                  | se                                       |   |  |                  |  |
|----------|---|---|-------------------------------|--|---|--|------------------|--|
| 7.       | The chapter of the Bankruptcy Code you are  | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. |                               |  |   |  |                  |  |
|          | choosing to file under  | ☐ Chapter 7   |                               |  |   |  |                  |  |
|          |   | □с  | hapter 11                     |  |   |  |                  |  |
|          |   | □с  | hapter 12                     |  |   |  |                  |  |
|          |   | <b>■</b> C  | hapter 13                     |  |   |  |                  |  |
|          | How you will pay the fee  |   | I will nay the                | entire fee who                           | an I file my petition. Places chas  | ck with the clerk's office in your local court for   | r moro dotails   |  |
| ,        | now you will pay the lee  | •   | about how yo                  | u may pay. Typ<br>attorney is subr       | ically, if you are paying the fee yo  | ourself, you may pay with cash, cashier's che<br>alf, your attorney may pay with a credit card   | eck, or money    |  |
|          |   |   |                               |  | callments. If you choose this options (Official Form 103A).   | on, sign and attach the Application for Individ  | duals to Pay     |  |
|          |   |   | but is not requapplies to you | uired to, waive y<br>ır family size an   | your fee, and may do so only if your fee, and may do so only if you you are unable to pay the fee i | n only if you are filing for Chapter 7. By law,<br>our income is less than 150% of the official p<br>in installments). If you choose this option, you<br>cial Form 103B) and file it with your petition. | overty line that |  |
|          | Have you filed for  |   |                               |  |   |  |                  |  |
| <b>.</b> | Have you filed for<br>bankruptcy within the<br>last 8 years?  | ■ No  |                               |  |   |  |                  |  |
|          | acto youro.   |   | District                      |  | When  | Case number  |                  |  |
|          |   |   | District                      |  | When  | Case number  |                  |  |
|          |   |   | District                      |  | When  | Case number  |                  |  |
|          |   |   |                               |  |   |  |                  |  |
| 10.      | Are any bankruptcy cases pending or being   | ■ No  | )                             |  |   |  |                  |  |
|          | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | □ Ye  | es.                           |  |   |  |                  |  |
|          |   |   | Debtor                        |  |   | Relationship to you  |                  |  |
|          |   |   | District                      |  | When  | Case number, if known  |                  |  |
|          |   |   | Debtor                        |  |   | Relationship to you  |                  |  |
|          |   |   | District                      |  | When  | Case number, if known  |                  |  |
| 11.      | Do you rent your residence?   | ■ No  | Go to li                      | ne 12.                                   |   |  |                  |  |
|          | residence:  | □Y€   | es. Has yo                    | ur landlord obta                         | ained an eviction judgment agains   | st you?  |                  |  |
|          |   |   |                               | No. Go to line                           | 12.   |  |                  |  |
|          |   |   |                               | Yes. Fill out <i>Ini</i> this bankruptcy |   | Judgment Against You (Form 101A) and file  | it as part of    |  |
|          |   |   |                               |  |   |  |                  |  |

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|------|---|-----------------------|--|--|
| Part | t 3: Report About Any Bu  | ısinesses             | You Own  | as a Sole Proprietor   |
| 12.  | Are you a sole proprietor of any full- or part-time business?   | ■ No.                 | Go to  | Part 4.  |
|      |   | ☐ Yes.                | Name   | and location of business   |
|      | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |                       | Name   | of business, if any  |
|      | If you have more than one sole proprietorship, use a separate sheet and attach  |                       | Numb   | er, Street, City, State & ZIP Code   |
|      | it to this petition.  |                       | Check  | k the appropriate box to describe your business:   |
|      |   |                       |  | Health Care Business (as defined in 11 U.S.C. § 101(27A))  |
|      |   |                       |  | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  |
|      |   |                       |  | Stockbroker (as defined in 11 U.S.C. § 101(53A))   |
|      |   |                       |  | Commodity Broker (as defined in 11 U.S.C. § 101(6))  |
|      |   |                       |  | None of the above  |
| 13.  | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?   | deadline<br>operation | f you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set a deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, supperations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the in 11 U.S.C. 1116(1)(B). |  |
|      | For a definition of small   | ■ No.                 | I am n   | not filing under Chapter 11.   |
|      | business debtor, see 11 U.S.C. § 101(51D).  | □ No.                 | I am fi<br>Code.   | iling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
|      |   | ☐ Yes.                | I am fi  | iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code |
| Part | t 4: Report if You Own or   | · Have Any            | / Hazardo  | ous Property or Any Property That Needs Immediate Attention  |
| 14.  | Do you own or have any  | ■ No.                 |  |  |
|      | property that poses or is alleged to pose a threat  | ☐ Yes.                |  |  |
|      | of imminent and identifiable hazard to  | □ res.                | What is t  | the hazard?  |
|      | public health or safety?<br>Or do you own any<br>property that needs<br>immediate attention?  |                       |  | liate attention is why is it needed?   |

For example, do you own perishable goods, or livestock that must be fed, or a building that needs

urgent repairs?

Number, Street, City, State & Zip Code

Where is the property?

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Part 5:

### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Der | Karen Castie  |   |  | Case numb  | ei (ii kriowii)   |  |  |  |
|-----|---|---|--|--|---|--|--|--|
| Par | t 6: Answer These Quest   | ions for R  | eporting Purposes  |  |   |  |  |  |
| 16. | What kind of debts do you have?   | 16a.  | Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." |  |   |  |  |  |
|     |   |   | ☐ No. Go to line 16b.  |  |   |  |  |  |
|     |   |   | Yes. Go to line 17.  |  |   |  |  |  |
|     |   | 16b.  |  | business debts? Business debts are debts avestment or through the operation of the business. |   |  |  |  |
|     |   |   | ☐ No. Go to line 16c.  |  |   |  |  |  |
|     |   |   | ☐ Yes. Go to line 17.  |  |   |  |  |  |
|     |   | 16c.  | State the type of debts you  | u owe that are not consumer debts or busine  | ess debts   |  |  |  |
| 17. | Are you filing under Chapter 7?   | ■ No.   | I am not filing under Chapt  | ter 7. Go to line 18.  |   |  |  |  |
|     | Do you estimate that after any exempt property is excluded and                          | ☐ Yes.  |  | 7. Do you estimate that after any exempt pro available to distribute to unsecured creditors  | perty is excluded and administrative expenses ?   |  |  |  |
|     | administrative expenses   |   | □No  |  |   |  |  |  |
|     | are paid that funds will<br>be available for<br>distribution to unsecured<br>creditors? |   | ☐ Yes  |  |   |  |  |  |
| 18. | How many Creditors do   | <b>■</b> 1-49   |  | ☐ 1,000-5,000  | ☐ 25,001-50,000   |  |  |  |
|     | you estimate that you owe?  | ■ 1-49<br>□ 50-99   | )  | □ 5001-10,000  | ☐ 50,001-100,000  |  |  |  |
|     |   | □ 100-1<br>□ 200-9  |  | □ 10,001-25,000  | ☐ More than100,000  |  |  |  |
| 19. | How much do you estimate your assets to be worth?                                       | □ \$0 - \$  | 350,000<br>101 - \$100,000   | ☐ \$1,000,001 - \$10 million<br>☐ \$10,000,001 - \$50 million                                | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion                          |  |  |  |
|     |   | <b>\$</b> 100,  | 001 - \$500,000<br>001 - \$1 million   | □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million                               | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion                              |  |  |  |
| 20. | How much do you estimate your liabilities   | □ \$0 - \$  |  | □ \$1,000,001 - \$10 million   | □ \$500,000,001 - \$1 billion   |  |  |  |
|     | to be?  |   | 001 - \$100,000<br>,001 - \$500,000  | ☐ \$10,000,001 - \$50 million<br>☐ \$50,000,001 - \$100 million                              | ☐ \$1,000,000,001 - \$10 billion<br>☐ \$10,000,000,001 - \$50 billion                   |  |  |  |
|     |   |   | ,001 - \$500,000<br>,001 - \$1 million   | □ \$100,000,001 - \$500 million  | ☐ More than \$50 billion  |  |  |  |
| Par | t 7: Sign Below   |   |  |  |   |  |  |  |
| For | you   | I have ex   | camined this petition, and I c   | declare under penalty of perjury that the infor  | mation provided is true and correct.  |  |  |  |
|     |   | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. |  |  |   |  |  |  |
|     |   | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  |  |  |   |  |  |  |
|     |   | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  |  |  |   |  |  |  |
|     |   | bankrupt<br>and 357   | tcy case can result in fines u   | ent, concealing property, or obtaining money up to \$250,000, or imprisonment for up to 20   | or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, |  |  |  |
|     |   | Karen (   |  | Signature of Debt  | or 2  |  |  |  |
|     |   | Executed  | d on July 24, 2018   | Executed on  |   |  |  |  |
|     |   |   | MM / DD / YYYY   | M  | M / DD / YYYY   |  |  |  |

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Stuart B. Handelman                      | Date           | July 24, 2018    |  |
|--|----------------|------------------|--|
| Signature of Attorney for Debtor             |                | MM / DD / YYYY   |  |
|  |                |                  |  |
| Stuart B. Handelman                          |                |                  |  |
| Printed name                                 | ·              | ·                |  |
| The Law Offices of Stuart B. Handelman, P.C. |                |                  |  |
| Firm name                                    |                |                  |  |
| 200 S. Michigan Avenue, Suite 205            |                |                  |  |
| Chicago, IL 60604                            |                |                  |  |
| Number, Street, City, State & ZIP Code       |                |                  |  |
| Contact phone (312) 360-0500                 | Email address  | court@sbhpc.net  |  |
| (012) 000 0000                               | Linaii address | court@sbripc.net |  |
| 6195779 IL                                   |                | <u></u>          |  |
| Bar number & State                           |                |                  |  |

| B-Li- | ed Konen Contin  |                               |  | C   | ase number (# Mac   | (SHE)  |  |  |  |
|-------|--|-------------------------------|--|---|---|--|--|--|--|
| Dable |  |                               | At a Supra A A   |   |   |  |  |  |  |
| Part  |  |                               | aporting Purposes  | noumer debie? Consumer de   | hte are defined in  | 11 U.S.C. § 101(8) as "incurred by en  |  |  |  |
| 16.   | What kind of debts do<br>you have?   | 168.                          | individual primarily for a perso   | onal, family, or household purp   | ose."   | •  |  |  |  |
|       | •  |                               | No. Go to line 16b.  |   |   |  |  |  |  |
|       |  |                               | ■ Yes. Go to line 17.  |   |   |  |  |  |  |
|       |  | 16b.                          | Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. |   |   |  |  |  |  |
|       |  |                               | □ No. Go to line 18c.  |   |   |  |  |  |  |
|       |  |                               | ☐ Yes. Go to line 17. State the type of debts you owe that are not consumer debts or business debts  |   |   |  |  |  |  |
|       |  | 16c.                          | State the type of debts you o  | we that are not consumer dest   | s or business out   |  |  |  |  |
| 17.   | Are you filling under<br>Chapter 77  | ■ No.                         | t am not filling under Chapter   | 7. Go to line 18.   |   |  |  |  |  |
|       | Do you estimate that<br>after any exempt<br>property is excluded and   | ☐ Yes.                        | I am filing under Chapter 7. I<br>are paid that funds will be av   | I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? |   |  |  |  |  |
|       | administrative expenses<br>are paid that funds will<br>be available for<br>distribution to unsecured<br>creditors? |                               | □ No   |   |   |  |  |  |  |
|       |  | 1                             | ☐ Yes  |   |   |  |  |  |  |
| 18.   | How many Creditors do you estimate that you awe?   | <b>1</b> 49                   |  | □ 1,000-5,000   |   | <u> 25,001-50,000</u>  |  |  |  |
|       |  | ☐ 60-B                        | =  | □ 5001-10,000<br>□ 10,001-26,000  |   | ☐ 50,001-100,000<br>☐ More than100,000   |  |  |  |
|       |  | □ 100-<br>□ 200-              |  | L 10,001-20,000   |   | S ave digitande  |  |  |  |
| 19.   | How much do you  | □ so -                        | \$50,000   | □ \$1,000,001 - \$10 m  | illion  | ☐ \$500,000,001 - \$1 billion  |  |  |  |
|       | estimate your assets to be worth?  | <b>550,001 - \$100,000</b>    |  | S10,000,001 - \$50  |   | □ \$1,000,000,001 - \$10 billion   |  |  |  |
|       | Og worder  |                               | 0,001 - 3500,000<br>0,001 - \$1 millian  | □ \$50,000,001 - \$100<br>□ \$100,000,001 - \$50  |   | ☐ \$10,000,000,001 - \$50 billion<br>☐ More than \$50 billion                    |  |  |  |
| 20.   | How much do you  | □ \$0 -                       | \$60,000   | □ \$1,000,001 - \$10 m  | Mion  | □ \$500,000,001 - \$1 billion  |  |  |  |
|       | estimate your fieblittles<br>to be?  |                               | ,001 - 8100,000  | \$10,000,001 - \$50   |   | S1,000,000,001 - \$10 billion  |  |  |  |
|       |  |                               | 0,001 - \$500,000<br>0,001 - \$1 million   |   | ☐ \$50,000,001 - \$100 million ☐ \$10,000,000,000,000,000,001 |  |  |  |  |
|       |  |                               |  |   |   |  |  |  |  |
| Pau   |  |                               |  | alone and an english of markets it  | hat the Informatio  | on provided is true and correct.   |  |  |  |
| PGF   | you  |                               | •  | •   |   |  |  |  |  |
|       |  | If I have<br>United I         | i chosen to file under Chapter i<br>States Code. I understand the  | 7, 1 am aware that I may proce<br>relief avallable under each cha   | ed, if eligible, und<br>pter, and I choos                     | ler Chapter 7, 11,12, or 13 of title 11,<br>e to proceed under Chapter 7.        |  |  |  |
|       |  | if no ett<br>docume           | omey represents me and I did<br>ont, I have obtained and read t  | not pay or agree to pay someone notice required by 11 U.S.C.  | ene who is not an<br>. § 342(b).                              | attorney to help me fill out this  |  |  |  |
|       |  | l neque                       | st relief in accordance with the   | chapter of title 11, United State   | es Code, specifie   | d in this petition.  |  |  |  |
|       |  | l under<br>banknij<br>and 357 | ptcy case can result in finos up<br>71.  | t, concealing property, or obtain<br>to \$250,000, or imprisonment  | ning money or pr<br>for up to 20 year                         | operty by fraud in connection with a<br>a, or both. 18 U.S.C. §§ 182, 1341, 1818 |  |  |  |
|       |  |                               | Castle tree of Debtor 1  | Signa   | lure of Deblor 2  |  |  |  |  |
|       |  | Execute                       | ed on 07/24/2018   | Ехеси   | ited on   |  |  |  |  |
|       |  |                               | MM/DD/YYYY   |   | MM / D  | D/YYY  |  |  |  |

| Fill in this mion                  | mation to identify your                          | 50861   |   |  |                                 |
|------------------------------------|--|---|---|--|---------------------------------|
| Debtor 1                           | Karen Castie                                     |   |   |  |                                 |
|                                    | First Name                                       | Missle Hame   | Last Name   |  |                                 |
| Debtor 2<br>(Spouse at (Mag)       | First Name                                       | Middle Name   | Last Hamp   |  |                                 |
| United States Ba                   | nkruptcy Court for the:                          | NORTHERN DISTRICT                                   | OF ILLINOIS   |  |                                 |
| Case number _                      |  |   |   |  | Makin in a                      |
| (C 4250))                          |  |   |   |  | li thie is en<br>ed filina      |
| You must file this obtaining money | s form whenever you ()                           | le bankruptoy schedules<br>n connection with a bank | naible for eupplying corre<br>or amended schedules. I<br>cruptcy case can result in | ect information.<br>Making a false statement, concealing<br>fines up to \$250,000, or imprisonme | property, or<br>nt for up to 20 |
| Sign                               | n Bolow  |   |   |  |                                 |
| Old you pa                         | y or agree to pay some                           | one who is NOT an attor                             | ney to help you fill out ba   | nkruptcy forms?  |                                 |
| ■ No                               |  |   |   |  |                                 |
| ☐ Yes. N                           | Vame of person                                   |   |   | Altach Benkruptcy Patition Pre<br>Decistration, and Signature (O                                 |                                 |
|                                    | ity of perjury, I deciare<br>e true and correct. | that I have read the sum                            | mary and schedules filed  | with this declaration and  |                                 |
| x Lan                              | Cat  |   | Y   |  |                                 |
| Karen                              |  |   | Signature of D  | ebtor 2  |                                 |
| Døte                               | 761/2018   |   | Date  |  |                                 |

Official Form 106Dec

Declaration About an Individual Debtor's Schadules

O7/24/2018 e 18-20030 Doc 1 Filed 07/24/18 Entered 07/24/18 11:42:47 Desc Main Document Page 10 of 72

Debtor 1 Karen Castia Case number (# Account)

No. None of the above applies. Go to Part 12.

|              | _2                    |   | u  | ede umungt (sweeu)   |  |  |  |  |  |
|--------------|-----------------------|---|--|--|--|--|--|--|--|
|              | ■ No                  | . None of the above applica. Go   | o to Part 12.  |  |  |  |  |  |  |
|              |                       |   |  |  |  |  |  |  |  |
|              |                       | esa Nama  | Describe the nature of the business.   | Employee Identificate  |  |  |  |  |  |
|              | Addre                 | 89  | •  | Employer identification number  Do not include Social Security number or ITIN.   |  |  |  |  |  |
|              | (HUMBO!               | , Street, City, State and ZIP Code)   | Name of accountant or bookkeeper   | -  |  |  |  |  |  |
|              |                       |   |  | Dates business existed   |  |  |  |  |  |
| 28.          | Within i<br>Instituti | 2 years before you filed for bani<br>ions, creditors, or other parties.                             | truptcy, did you give a financial statement to a   | nyone about your business? Include all (Insnole)   |  |  |  |  |  |
|              | ■ No                  | )<br>   |  |  |  |  |  |  |  |
|              | □ Yes                 | s. Fill in the details below.   |  |  |  |  |  |  |  |
|              | Name                  |   | Date issued  |  |  |  |  |  |  |
|              | Addres                | lā<br>, Štroot, City, Bists and ZIP Geom  |  |  |  |  |  |  |  |
|              |                       |   |  |  |  |  |  |  |  |
| Ρđ           | <b>514</b> 8          | ign Below   |  |  |  |  |  |  |  |
| vith<br>18 U | a bankn<br>.s.c. §§   | correct, I uncertainth that make<br>uptoy case can result in fines up<br>152, 1341, 1619, and 3871. | f Financial Affairs and any ettechments, and I<br>ng a felse statement, concealing property, or o<br>p to \$250,009, or imprisonment for up to 20 year | declare under penalty of perjury that the answere<br>bitaining money or property by fraud in connection<br>are, or both. |  |  |  |  |  |
|              | an C                  |   |  |  |  |  |  |  |  |
|              | en Cas                | lle<br>f D <del>ebtor</del> 1   | Signature of Dabtor 2  |  |  |  |  |  |  |
| _            |                       |   |  |  |  |  |  |  |  |
| Det          | • <u>7/</u>           | 124/2018  | Date   |  |  |  |  |  |  |
| id y         | 0                     | ch additional pages to <i>Your St</i> ar  | ement of Financial Affairs for Individuals Filin   |  |  |  |  |  |  |
| Hd j<br>■ M  |                       | or agree to pay someone who la  | nat an attorney to help you fill out benkrupte;  | y forme?   |  |  |  |  |  |

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bentruptcy Petition Preparer's Notice, Declaration, and Signature (Cificial Form 119).

|       |  | United States Bankruptcy Court Northern District of Illinois |            |                           |
|-------|--|--|------------|---------------------------|
| In re | Karen Castle                                   |  | Case No.   |                           |
|       |  | Debtor(s)  | Chapter    | 13                        |
|       | VERI   | FICATION OF CREDITOR MATE                                    | их         |                           |
|       |  | Number of Cred   | itors: _   | 68                        |
|       | The above-named Debtor(s) her (our) knowledge. | reby verifies that the list of creditors is                  | s true and | correct to the best of my |
| Date: | 1/24/2018                                      | Ken Cast   |            |                           |

Karen Castle Signature of Debtor Case 18-20630 Doc 1 Filed 07/24/18 Entered 07/24/18 11:42:47 Desc Main

| Debtor 1                                | Karen Castle |                   |             |  |
|---|--------------|-------------------|-------------|--|
|   | First Name   | Middle Name       | Last Name   |  |
| Debtor 2                                |              |                   |             |  |
| Spouse if, filing)                      | First Name   | Middle Name       | Last Name   |  |
| United States Bankruptcy Court for the: |              | NORTHERN DISTRICT | OF ILLINOIS |  |
| Case number                             |              |                   |             |  |
| if known)                               |              |                   |             |  |

Check if this is an amended filing

### Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | 1: Summarize Your Assets  |             |                           |
|-----|---|-------------|---------------------------|
|     |   | Your a      | essets<br>of what you own |
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B   | \$          | 84,900.00                 |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B  | \$          | 44,330.00                 |
|     | 1c. Copy line 63, Total of all property on Schedule A/B   | \$          | 129,230.00                |
| Par | 2: Summarize Your Liabilities   |             | _                         |
|     |   |             | iabilities<br>nt you owe  |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D              | \$          | 96,515.86                 |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | \$          | 0.00                      |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$          | 48,046.85                 |
|     | Your total liabilities  | \$          | 144,562.71                |
| Par | 3: Summarize Your Income and Expenses   |             |                           |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I   | \$          | 3,318.77                  |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J   | \$          | 2,133.77                  |
| Par | 4: Answer These Questions for Administrative and Statistical Records  |             |                           |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                                  | ur other sc | hedules.                  |
| 7.  | Yes What kind of debt do you have?  |             |                           |
|     | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a bounded purpose "141 U.S.C. \$ 101(0). Fill out lines 8.00 for detiction purposes 28 U.S.C. \$ 150 | a personal  | , family, or              |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

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Page 13 of 72 Case number (if known) Debtor 1 Karen Castle

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,945.95 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total cla | ıim  |
|--|-----------|------|
| From Part 4 on Schedule E/F, copy the following:   |           |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$        | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$        | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$        | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$        | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$        | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$       | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$        | 0.00 |

|                              |   | Case 18-20630  | Doc 1  |                          | 07/24/18<br>ument                  | Entered 07/24/18 Page 14 of 72   | 3 11:42:47  | Desc          | Main  |
|------------------------------|---|--|--|--------------------------|------------------------------------|--|---|---------------|---|
| Fill                         | in this in  | formation to identify  | your case and th   |                          |                                    |  |   |               |   |
| Deb                          | otor 1  | Karen Castle   |  | e Name                   |                                    | Last Name  |   |               |   |
|                              | otor 2<br>ouse, if filing)                              | First Name   | Middle   | e Name                   |                                    | Last Name  |   |               |   |
| Unit                         | ted States  | Bankruptcy Court for   | the: NORTHER   | N DIST                   | RICT OF ILLIN                      | NOIS   |   |               |   |
| Cas                          | se numbe  | r  |  |                          |                                    | -  |   |               | Check if this is an amended filing            |
| _                            |   | Form 106A/B<br>ule A/B: Pr   | =  |                          |                                    |  |   |               | 12/15   |
| n ea<br>hink<br>nfor<br>Ansv | ch catego<br>t it fits bes<br>mation. If<br>wer every t | ry, separately list and d<br>t. Be as complete and a<br>more space is needed, a<br>question. | escribe items. List<br>accurate as possibl<br>attach a separate si | le. If two<br>heet to ti | married people<br>nis form. On the | an asset fits in more than one of the are filing together, both are ended to any additional pages, was nor Have an Interest In | qually responsib  | ole for suppl | ying correct                                  |
|                              |   |  |  |                          |                                    |  |   |               |   |
| . Do                         | o you own   | or have any legal or eq  | uitable interest in a  | ıny resid                | ence, building,                    | land, or similar property?   |   |               |   |
|                              | No. Go to   | Part 2.  |  |                          |                                    |  |   |               |   |
|                              | Yes. Who  | ere is the property?   |  |                          |                                    |  |   |               |   |
| 1.1                          |   |  |  | What                     | is the property                    | /? Check all that apply  |   |               |   |
|                              |   | . Luna Avenue  |  | Single-family home       |                                    |  | Do not deduct secured claims or exemptions. Put                         |               |   |
|                              | Street add  | Street address, if available, or other description   |  |                          | Duplex or mult                     | ti-unit building<br>or cooperative   | the amount of any secured claims of<br>Creditors Who Have Claims Secure |               |   |
|                              | Chicag  | 10 IL  | 60638-0000   |                          | Manufactured<br>Land               | or mobile home   | Current value o   |               | current value of the ortion you own?          |
|                              | City  | State  | ZIP Code   | _                        | Investment pro                     | operty   | \$84,90   | •             | \$84,900.00                                   |
|                              |   |  |  | U<br>Who                 | Timeshare Other has an interest    | in the property? Check one   |   | nple, tenanc  | ownership interest<br>y by the entireties, or |
|                              |   |  |  |                          | Debtor 1 only                      |  |   |               |   |
|                              | Cook  |  |  |                          | Debtor 2 only                      |  |   |               |   |
|                              | County  |  |  |                          | Debtor 1 and I                     | •  |   |               | nity property                                 |
|                              |   |  |  |                          |                                    | f the debtors and another  ou wish to add about this item,  on number:   | such as local   | ons)          |   |
|                              |   |  |  |                          | -                                  | y Residence & Lot  |   |               |   |
|                              |   |  |  |                          |                                    |  |   |               |   |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$84,900.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document Debtor 1 Karen Castle 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Clothing \$100.00 In Debtor's Possession 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... Four (4) Dogs \$0.00 In Debtor's Possession 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$900.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

□ No

Institution name: ■ Yes.....

> **Bank of America** 17.1. Checking

\$0.00

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Case number (if known) Document Debtor 1 **Karen Castle** 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and 20. Government and corporate bonds and other negotiable and non-negotiable instruments 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No ☐ Yes. ..... Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own?

Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

| De  | btor 1  | Case 18-20630 Karen Castle                                       | Doc 1                       | Filed 07/24/18<br>Document  | Entered 07/24/18 11:42:47<br>Page 18 of 72<br>Case number (if known) | Desc Main                  |  |  |
|-----|---|--|-----------------------------|-----------------------------|--|----------------------------|--|--|
|     | F1  |  |                             |                             |  |                            |  |  |
|     |   | y support ples: Past due or lump sum                             | alimony, spo                | ousal support, child suppo  | ort, maintenance, divorce settlement, property                       | settlement                 |  |  |
|     | □ Yes.  | Give specific information  |                             |                             |  |                            |  |  |
|     | Exam  | benefits; unpaid loans   | ty insurance                |                             | efits, sick pay, vacation pay, workers' compe                        | nsation, Social Security   |  |  |
|     | ⊔ Yes.  | Give specific information  |                             |                             |  |                            |  |  |
|     |   | sts in insurance policies ples: Health, disability, or life      | e insurance;                | health savings account (    | HSA); credit, homeowner's, or renter's insurar                       | nce                        |  |  |
|     | ■ Yes.  | Name the insurance compa<br>Com                                  | any of each p<br>pany name: | policy and list its value.  | Beneficiary:   | Surrender or refund value: |  |  |
|     |   | Tern   | n Life Insu                 | rance through Emplo         | over   | \$0.00                     |  |  |
|     |   |  |                             |                             |  |                            |  |  |
|     | 32. Any interest in property that is due you from someone who has died  If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.  ■ No  □ Yes. Give specific information |  |                             |                             |  |                            |  |  |
|     | Exam  | s against third parties, who<br>ples: Accidents, employmen       |                             |                             | it or made a demand for payment s to sue                             |                            |  |  |
|     | No  |  |                             |                             |  |                            |  |  |
|     | ⊔ Yes.  | Describe each claim  |                             |                             |  |                            |  |  |
|     | ■ No  |  | ed claims of                | f every nature, including   | g counterclaims of the debtor and rights to                          | set off claims             |  |  |
|     | ☐ Yes.  | Describe each claim  |                             |                             |  |                            |  |  |
| 35. | Any fi<br>■ No  | nancial assets you did not                                       | already list                |                             |  |                            |  |  |
|     | ☐ Yes.  | Give specific information  |                             |                             |  |                            |  |  |
| 36  |   |  |                             |                             | ny entries for pages you have attached                               | \$0.00                     |  |  |
| Pai | rt 5: De  | escribe Any Business-Related                                     | Property You                | ı Own or Have an Interest I | In. List any real estate in Part 1.                                  |                            |  |  |
| 37  | Do vou  | own or have any legal or equi                                    | table interest              | in any business-related p   | roperty?   |                            |  |  |
|     | _ ′   | o to Part 6.   |                             | ,                           |  |                            |  |  |
|     | Yes.  | Go to line 38.   |                             |                             |  |                            |  |  |
|     |   |  |                             |                             |  |                            |  |  |
| Pai |   | escribe Any Farm- and Comme<br>you own or have an interest in fa |                             |                             | n or Have an Interest In.  |                            |  |  |
| 46. | ■ No.   | . Go to Part 7.  | equitable in                | nterest in any farm- or o   | commercial fishing-related property?                                 |                            |  |  |
|     | ☐ Yes   | s. Go to line 47.  |                             |                             |  |                            |  |  |
| Pai | rt 7:   | Describe All Property You  | Own or Have                 | an Interest in That You Dic | l Not List Above   |                            |  |  |

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Case number (if known)

| Deb               | otor 1 _                                | Karen Castle   | Document              | Case numb                         | per (if known) |
|-------------------|---|--|-----------------------|-----------------------------------|----------------|
|                   |   | ave other property of any kind you ds: Season tickets, country club membe                        |                       |                                   |                |
|                   | No                                      |  |                       |                                   |                |
|                   | ☐ Yes. Gi                               | ve specific information  |                       |                                   |                |
| 54.               | Add the                                 | dollar value of all of your entries fro  | om Part 7. Write that | number here                       | \$0.00         |
| Part              | 8: Li                                   | st the Totals of Each Part of this Form  |                       |                                   |                |
| 55.               |   |  |                       |                                   |                |
| 55.               | Part 1:                                 | Fotal real estate, line 2  |                       |                                   | \$84,900.00    |
| 56.               |   | Fotal real estate, line 2<br>Fotal vehicles, line 5  |                       | \$43,430.00                       | \$84,900.00    |
|                   | Part 2:                                 | ,  | _                     |                                   | \$84,900.00    |
| 56.               | Part 2: 7                               | Total vehicles, line 5   | _                     | \$43,430.00                       | \$84,900.00    |
| 56.<br>57.        | Part 2: 7<br>Part 3: 7<br>Part 4: 7     | Total vehicles, line 5 Total personal and household items,                                       | line 15               | \$43,430.00<br>\$900.00           | \$84,900.00    |
| 56.<br>57.<br>58. | Part 2: 1 Part 3: 1 Part 4: 1 Part 5: 1 | Fotal vehicles, line 5<br>Fotal personal and household items,<br>Fotal financial assets, line 36 | line 15               | \$43,430.00<br>\$900.00<br>\$0.00 | \$84,900.00    |

\$44,330.00

Copy personal property total

63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

\$129,230.00

\$44,330.00

Official Form 106A/B Schedule A/B: Property page 6

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| Fill in this inform                     | mation to identify your | case:             |             |  |
|---|-------------------------|-------------------|-------------|--|
| Debtor 1                                | Karen Castle            |                   |             |  |
|   | First Name              | Middle Name       | Last Name   |  |
| Debtor 2                                |                         |                   |             |  |
| (Spouse if, filing)                     | First Name              | Middle Name       | Last Name   |  |
| United States Bankruptcy Court for the: |                         | NORTHERN DISTRICT | OF ILLINOIS |  |
| Case number                             |                         |                   |             |  |
| (if known)                              |                         |                   |             |  |
|   |                         |                   |             |  |

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the<br>portion you own | · · · · · · · · · · · · · · · · · · · |   | Specific laws that allow exemption |  |
|--|---|---------------------------------------|---|------------------------------------|--|
|  | Copy the value from<br>Schedule A/B     | Che                                   | ck only one box for each exemption.                             |                                    |  |
| 4951 S. Luna Avenue Chicago, IL<br>60638 Cook County                                   | \$84,900.00                             |                                       | \$15,000.00   | 735 ILCS 5/12-901                  |  |
| Debtor's Primary Residence & Lot<br>Line from Schedule A/B: 1.1                        |   |                                       | 100% of fair market value, up to any applicable statutory limit |                                    |  |
| 2014 Chevrolet Silverado 21,000 miles  | \$25,514.00                             |                                       | \$2,400.00  | 735 ILCS 5/12-1001(c)              |  |
| In Debtor's Possession Line from Schedule A/B: 3.2                                     |   |                                       | 100% of fair market value, up to any applicable statutory limit |                                    |  |
| 2014 Chevrolet Silverado 21,000 miles  | \$25,514.00                             |                                       | \$3,200.00  | 735 ILCS 5/12-1001(b)              |  |
| In Debtor's Possession Line from Schedule A/B: 3.2                                     |   |                                       | 100% of fair market value, up to any applicable statutory limit |                                    |  |
| Household Goods In Debtor's Possession   | \$800.00                                |                                       | \$800.00  | 735 ILCS 5/12-1001(b)              |  |
| Line from Schedule A/B: 6.1  |   |                                       | 100% of fair market value, up to any applicable statutory limit |                                    |  |
| Clothing<br>In Debtor's Possession   | \$100.00                                |                                       | \$100.00  | 735 ILCS 5/12-1001(a)              |  |
| Line from Schedule A/B: 11.1   |   |                                       | 100% of fair market value, up to any applicable statutory limit |                                    |  |

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Debtor 1 Karen Castle

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

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|----------------------------------|---------------------|---|-------------------|------------------------------------|--|-------------------|
| Fill in this informatio          | n to identify you   | r case:   |                   |                                    |  |                   |
| Debtor 1 K                       | aren Castle         |   |                   |                                    |  |                   |
|                                  | rst Name            | Middle Name   | Last Name         |                                    |  |                   |
| Debtor 2                         |                     |   |                   |                                    |  |                   |
| (Spouse if, filing) Fir          | rst Name            | Middle Name   | Last Name         |                                    |  |                   |
| United States Bankrup            | otcv Court for the: | NORTHERN DISTRICT OF ILI  | LINOIS            |                                    |  |                   |
|                                  | ,                   |   |                   |                                    |  |                   |
| Case number                      |                     |   |                   |                                    |  |                   |
| (if known)                       |                     |   |                   |                                    |  | if this is an     |
|                                  |                     |   |                   |                                    | ameno                                  | led filing        |
| Official Form 10                 | neD                 |   |                   |                                    |  |                   |
| Official Form 10                 |                     |   | _                 |                                    |  |                   |
| Schedule D:                      | Creditors           | Who Have Claims   | Secure            | ed by Property                     | y                                      | 12/15             |
|                                  |                     | f two married people are filing togeth<br>out, number the entries, and attach it        |                   |                                    |  |                   |
| 1. Do any creditors have         | claims secured by   | your property?  |                   |                                    |  |                   |
| ☐ No. Check this                 | box and submit th   | nis form to the court with your other   | schedules.        | You have nothing else to           | o report on this form.                 |                   |
| Yes. Fill in all o               |                     | •   |                   |                                    |  |                   |
|                                  |                     | Delow.  |                   |                                    |  |                   |
| Part 1: List All Sec             | cured Claims        |   |                   | 0-1                                | Column B                               | Column C          |
|                                  |                     | nore than one secured claim, list the cre   |                   |                                    |  |                   |
|                                  |                     | a particular claim, list the other creditor<br>al order according to the creditor's nam |                   | Amount of claim  Do not deduct the | Value of collateral that supports this | Unsecured portion |
|                                  | •                   | •   |                   | value of collateral.               | claim                                  | If any            |
| 2.1 Cook County                  | Treasurer           | Describe the property that secures  |                   | <u>\$887.26</u>                    | \$84,900.00                            | \$0.00            |
| Creditor's Name                  |                     | 4951 S. Luna Avenue Chica   | go, IL            |                                    |  |                   |
|                                  |                     | 60638 Cook County Debtor's Primary Residence  | . 9 1 04          |                                    |  |                   |
|                                  |                     | TO BE PAID INSIDE PLAN  | a LUI             |                                    |  |                   |
| PO Box 80543                     | 00                  | As of the date you file, the claim is:  | Check all that    |                                    |  |                   |
| Chicago, IL 60                   | -                   | apply.  |                   |                                    |  |                   |
| Number, Street, City, S          |                     | Contingent  |                   |                                    |  |                   |
| Number, Street, City, S          | State & Zip Code    | ☐ Unliquidated☐ Disputed☐   |                   |                                    |  |                   |
| Who owes the debt?               | Check one           | Nature of lien. Check all that apply.   |                   |                                    |  |                   |
| ■ Debtor 1 only                  |                     | ☐ An agreement you made (such as  | mortgage or s     | ecured                             |  |                   |
| Debtor 2 only                    |                     | car loan)   | origago or o      | 000.00                             |  |                   |
| Debtor 1 and Debtor 2            | 2 only              | ☐ Statutory lien (such as tax lien, me  | chanic's lian)    |                                    |  |                   |
| ☐ At least one of the deb        |                     | ☐ Judgment lien from a lawsuit  | criariic 3 lieri) |                                    |  |                   |
| ☐ Check if this claim re         |                     | Other (including a right to offset)   | 2017 Sec          | ond Installment of R               | eal Estate Taxes                       |                   |
| community debt                   |                     | — Other (including a right to onset)  |                   |                                    |  |                   |
| Born lake and a soul             |                     | Land & Parks of Land of Land  |                   |                                    |  |                   |
| Date debt was incurred           |                     | Last 4 digits of account num  | ber <u>0000</u>   | <u> </u>                           |  |                   |
|                                  | _                   |   |                   | <b>4</b>                           |  | 4                 |
| 2.2 Cook County  Creditor's Name | Treasurer           | Describe the property that secures  |                   | \$887.26                           | \$84,900.00                            | \$0.00            |
| Creditor's Name                  |                     | 4951 S. Luna Avenue Chica   | go, IL            |                                    |  |                   |
|                                  |                     | 60638 Cook County Debtor's Primary Residence  | & Lot             |                                    |  |                   |
|                                  |                     | TO BE PAID INSIDE PLAN  | a Lot             |                                    |  |                   |
| PO Box 80543                     | 00                  | As of the date you file, the claim is:  | Check all that    |                                    |  |                   |
| Chicago, IL 60                   | -                   | apply.  |                   |                                    |  |                   |
| Number, Street, City, S          |                     | ☐ Contingent☐ Unliquidated  |                   |                                    |  |                   |
| Number, Street, City, C          | State & Zip Code    | ☐ Disputed  |                   |                                    |  |                   |
| Who owes the debt?               | Check one.          | Nature of lien. Check all that apply.   |                   |                                    |  |                   |
| ■ Debtor 1 only                  |                     | ☐ An agreement you made (such as  | mortgage or s     | ecured                             |  |                   |
| Debtor 2 only                    |                     | car loan)   |                   |                                    |  |                   |
| Debtor 1 and Debtor 2            | 2 only              | ☐ Statutory lien (such as tax lien, me  | chanic's lien\    |                                    |  |                   |
| ☐ At least one of the deb        | -                   | ☐ Judgment lien from a lawsuit  | onanio o non      |                                    |  |                   |
| ☐ Check if this claim re         |                     | Other (including a right to offset)   | 2017 Sec          | ond Installment of R               | eal Estate Taxes                       |                   |
| community debt                   |                     | Caron (moldaling a right to onset)  |                   |                                    | · · · · · · · · · · · · · · · · · · ·  |                   |

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| Debtor 1 Karen Castle First Name Middle N   | Lost Name   | Case number (if know) |             |        |
|---|---|-----------------------|-------------|--------|
| First Name Middle N   | lame Last Name  |                       |             |        |
| Date debt was incurred  | Last 4 digits of account number 0000  |                       |             |        |
| 2.3 Freedom Mortgage Creditor's Name  | Describe the property that secures the claim:  4951 S. Luna Avenue Chicago, IL 60638 Cook County Debtor's Primary Residence TO BE PAID OUTSIDE PLAN | \$58,431.20           | \$84,900.00 | \$0.00 |
| P.O. Box 89486<br>Cleveland, OH 44101   | As of the date you file, the claim is: Check all that apply.  Contingent  |                       |             |        |
| Number, Street, City, State & Zip Code  | ☐ Unliquidated ☐ Disputed   |                       |             |        |
| Who owes the debt? Check one.   | Nature of lien. Check all that apply.   |                       |             |        |
| ■ Debtor 1 only □ Debtor 2 only   | An agreement you made (such as mortgage or se car loan)   | ecured                |             |        |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a | ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)  Mortgage                 |                       |             |        |
| community debt  |   |                       |             |        |
| Date debt was incurred  | Last 4 digits of account number 8331  |                       |             |        |
| 2.4 Freedom Mortgage  | Describe the property that secures the claim:   | \$15,254.57           | \$84,900.00 | \$0.00 |
| Creditor's Name   | 4951 S. Luna Avenue Chicago, IL<br>60638 Cook County<br>Debtor's Primary Residence<br>TO BE PAID INSIDE PLAN  |                       |             |        |
| P.O. Box 89486<br>Cleveland, OH 44101   | As of the date you file, the claim is: Check all that apply.  Contingent  |                       |             |        |
| Number, Street, City, State & Zip Code  | ☐ Unliquidated ☐ Disputed   |                       |             |        |
| Who owes the debt? Check one.   | Nature of lien. Check all that apply.   |                       |             |        |
| Debtor 1 only   | ☐ An agreement you made (such as mortgage or se car loan)   | ecured                |             |        |
| Debtor 2 only   | ,   |                       |             |        |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another                                    | ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit   |                       |             |        |
| ☐ Check if this claim relates to a community debt   | Other (including a right to offset)  Mortgage   | Arrearage             |             |        |
| Date debt was incurred  | Last 4 digits of account number 8331  |                       |             |        |
| 2.5 OneMain   | Describe the property that secures the claim:   | \$21,055.57           | \$17,916.00 | \$0.00 |
| Creditor's Name   | 2012 Chevrolet Silverado 41,000 miles   |                       |             |        |
| P.O. Box 742536<br>Cincinnati, OH<br>45274-2536   | TO BE PAID INSIDE PLAN  As of the date you file, the claim is: Check all that apply.  Contingent  |                       |             |        |
| Number, Street, City, State & Zip Code  | ☐ Unliquidated ☐ Disputed   |                       |             |        |
| Who owes the debt? Check one.   | Nature of lien. Check all that apply.   |                       |             |        |
| ■ Debtor 1 only □ Debtor 2 only   | ☐ An agreement you made (such as mortgage or secar loan)  | ecured                |             |        |
| Debtor 1 and Debtor 2 only  | ☐ Statutory lien (such as tax lien, mechanic's lien)  |                       |             |        |
| ☐ At least one of the debtors and another   | ☐ Judgment lien from a lawsuit  |                       |             |        |
| ☐ Check if this claim relates to a community debt   | •   | Money Security Intere | est         |        |
| Date debt was incurred March 2016   | Last 4 digits of account number 3666  |                       |             |        |

Official Form 106D

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| Debtor 1   | Karen Castle                                | 9   |                                  | Case number (if know)   |  |  |
|------------|---|---|----------------------------------|---|--|--|
|            | First Name                                  | Middle Name   | Last Name                        |   |  |  |
|            |   |   |                                  |   |  |  |
| Add the    | dollar value of yo                          | our entries in Column A on  | this page. Write that number     | here: \$96,515.86   |  |  |
|            | the last page of y<br>at number here:       | your form, add the dollar va                                      | llue totals from all pages.      | \$96,515.86   |  |  |
| Part 2:    | List Others to E                            | Be Notified for a Debt Th   | nat You Already Listed           |   |  |  |
| rying to o | collect from you for<br>creditor for any of | or a debt you owe to somed  | one else, list the creditor in P | bbt that you already listed in Part 1. For example, if a collection agency is art 1, and then list the collection agency here. Similarly, if you have more editors here. If you do not have additional persons to be notified for any |  |  |
| Ar         | nselmo Lindbe                               | et, City, State & Zip Code<br>erg Oliver LLC<br>I Road, Suite 120 |                                  | On which line in Part 1 did you enter the creditor?   |  |  |
|            | perville, IL 60                             | •   |                                  | Last 4 digits of account number   |  |  |
|            |   | et, City, State & Zip Code<br>erg Oliver LLC                      |                                  | On which line in Part 1 did you enter the creditor? 2.4   |  |  |
| 17         |   | l Road, Suite 120   |                                  | Last 4 digits of account number   |  |  |

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|  |   | Document   | Page 25 of 72  |  |
|--|---|--|--|--|
| Fill in th   | nis information to identify your  | case:  |  |  |
| Debtor 1   | Karen Castle  |  |  |  |
|  | First Name  | Middle Name  | Last Name  |  |
| Debtor 2<br>(Spouse if,                                      |   | Middle Name  | Last Name  |  |
| United S   | States Bankruptcy Court for the:  | NORTHERN DISTRICT OF IL  | LINOIS   |  |
| Case nu<br>(if known)  | mber  |  | -  | Check if this is an amended filing   |
| Sched  | al Form 106E/F<br>dule E/F: Creditors W   |  |  | 12/15  |
| any execu<br>Schedule<br>Schedule<br>left. Attac<br>name and | tory contracts or unexpired leases<br>G: Executory Contracts and Unexp<br>D: Creditors Who Have Claims Sec<br>h the Continuation Page to this page<br>I case number (if known). | that could result in a claim. Also bired Leases (Official Form 106G). I sured by Property. If more space is ge. If you have no information to re | TY claims and Part 2 for creditors with NONPRIORITY cla<br>list executory contracts on Schedule A/B: Property (Offic<br>Do not include any creditors with partially secured claim<br>needed, copy the Part you need, fill it out, number the e<br>port in a Part, do not file that Part. On the top of any add | cial Form 106A/B) and on<br>s that are listed in<br>ntries in the boxes on the |
| Part 1:  | List All of Your PRIORITY Ur  |  |  |  |
|  | ny creditors have priority unsecure   | ed claims against you?   |  |  |
| ■ N  | lo. Go to Part 2.   |  |  |  |
|  | <del></del> -   |  |  |  |
| Part 2:  |   |  |  |  |
| 3. Do a  | ny creditors have nonpriority unsec   | cured claims against you?  |  |  |
| ΠN   | o. You have nothing to report in this p   | eart. Submit this form to the court with   | your other schedules.  |  |
| <b>■</b> Y   | es.   |  |  |  |
| unse   | cured claim, list the creditor separatel one creditor holds a particular claim, I   | y for each claim. For each claim lister  | ne creditor who holds each claim. If a creditor has more the d, identify what type of claim it is. Do not list claims already in have more than three nonpriority unsecured claims fill out the  | ncluded in Part 1. If more   |
|  |   |  |  | Total claim  |
| 4.1  | Action Card   | Last 4 digits of acc   | count number 9751  | \$369.19   |
|  | Nonpriority Creditor's Name P.O. Box 105555   | When was the deb   | t incurred?  |  |
|  | Atlanta, GA 30348-5555<br>Number Street City State Zlp Code   | As of the date you   | file, the claim is: Check all that apply   |  |
| ,  | Who incurred the debt? Check one.   |  |  |  |
|  | Debtor 1 only   | ☐ Contingent   |  |  |
|  | Debtor 2 only   | ☐ Unliquidated   |  |  |
|  | Debtor 1 and Debtor 2 only  | ☐ Disputed   |  |  |
|  | At least one of the debtors and an  | Oli lei  | RITY unsecured claim:  |  |
|  | Check if this claim is for a com  | <u> </u>   |  |  |
|  | debt<br>Is the claim subject to offset?   | Obligations arisi report as priority cla   | ng out of a separation agreement or divorce that you did not ims   |  |
|  | ■ No  |  | n or profit-sharing plans, and other similar debts   |  |
|  | ☐ Yes   | Other. Specify   | Credit Card  | _  |

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Debtor 1 Karen Castle 4.2 \$848.61 **ADT Security Services** Last 4 digits of account number 4614 Nonpriority Creditor's Name 111 Windsor Drive When was the debt incurred? Oak Brook, IL 60523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection ☐ Yes 4.3 AT&T U Verse Last 4 digits of account number 9456 \$684.00 Nonpriority Creditor's Name PO Box 5014 When was the debt incurred? Carol Stream, IL 60197 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Collection Other. Specify 4.4 **Bank of America** Last 4 digits of account number 0722 \$759.79 Nonpriority Creditor's Name P.O. Box 851001 When was the debt incurred? Dallas, TX 75285-1001 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card

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Debtor 1 Karen Castle 4.5 \$1,608.14 **Best Buy Credit Services** Last 4 digits of account number 4108 Nonpriority Creditor's Name P.O. Box 78009 When was the debt incurred? Phoenix, AZ 85062-8009 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.6 **Capital One Card Services** Last 4 digits of account number 2871 \$1,563.00 Nonpriority Creditor's Name P.O. Box 71107 When was the debt incurred? Charlotte, NC 28272-1107 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.7 Capital One Retail Services Last 4 digits of account number \$3,690.97 1537 Nonpriority Creditor's Name P.O Box 71106 When was the debt incurred? Charlotte, NC 28272-1106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account

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Debtor 1 Karen Castle 4.8 \$1,306.78 Chase Last 4 digits of account number 8105 Nonpriority Creditor's Name P.O. Box 1423 When was the debt incurred? Charlotte, NC 28201-1423 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.9 \$1,000.00 ComEd Last 4 digits of account number 0017 Nonpriority Creditor's Name P.O. Box 6111 When was the debt incurred? Carol Stream, IL 60197-6111 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Utilities Other. Specify 4.1 **Credit One Bank** 8664 \$1,702.36 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 60500 When was the debt incurred? City Of Industry, CA 91716-0500 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Case number (if know)

Debtor 1 Karen Castle 4.1 Directv, Inc. 8632 \$504.33 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 29079 When was the debt incurred? Glendale, CA 91209-9079 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes 4.1 Discover 9555 \$2,620.06 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 6103 Carol Stream, IL 60197-6103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.1 **Home Depot Credit Services** 9253 \$833.28 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 78011 When was the debt incurred? Phoenix, AZ 85062-8011 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

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Debtor 1 Karen Castle 4.1 Macy's 5240 \$411.12 Last 4 digits of account number 4 Nonpriority Creditor's Name P.O. Box 9001094 When was the debt incurred? Louisville, KY 40290-1094 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 **Mariner Finance** 0022 \$6,691.09 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 8211 Town Center Drive Nottingham, MD 21236 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Loan 4.1 Merrick Bank 7690 \$2,107,84 Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 660702 When was the debt incurred? Dallas, TX 75266 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card

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Debtor 1 Karen Castle 4.1 Michael Butkiewicz, DDS 1571 \$125.00 Last 4 digits of account number Nonpriority Creditor's Name 6233 W. 55th Street When was the debt incurred? Chicago, IL 60638-2530 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.1 **Nicor Gas** 3451 \$1,043.04 Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 5407 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Utilities ☐ Yes 4.1 Republic Bank & Trust Company 2429 \$4.113.00 9 Last 4 digits of account number Nonpriority Creditor's Name **Elastic Payment Processing** When was the debt incurred? P.O. Box 950276 Louisville, KY 40295-0276 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes

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Page 32 of 72 Case number (if know) Debtor 1 Karen Castle 4.2 Republic Services #721 \$820.00 0095 Last 4 digits of account number 0 Nonpriority Creditor's Name P.O. Box 9001154 When was the debt incurred? Louisville, KY 40290-1154 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Utilities 4.2 Rise Credit of Illinois, LLC 1823 \$4,809.17 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 4150 International Plaza, Suite 300 Fort Worth, TX 76109 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Loan 4.2 Rush Oak Park Hospital 2262 \$303.39 Last 4 digits of account number Nonpriority Creditor's Name 26099 Network Place When was the debt incurred? Chicago, IL 60673-1260 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Bills** Other. Specify

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Debtor 1 Karen Castle 4.2 Rush Oak Park Hospital 2403 \$38.71 Last 4 digits of account number 3 Nonpriority Creditor's Name 26099 Network Place When was the debt incurred? Chicago, IL 60673-1260 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.2 **Rush University Medical Center** 1419 \$137.23 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 4075 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.2 SPRINT Bankruptcy Dept. 4821 \$912.00 Last 4 digits of account number Nonpriority Creditor's Name 1310 Martin Luther King Drive When was the debt incurred? Bloomington, IL 61701 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Collection

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Page 34 of 72 Case number (if know) Debtor 1 Karen Castle 4.2 Synchrony Bank/Ashley Furniture 3625 \$2,403.71 Last 4 digits of account number 6 Nonpriority Creditor's Name P.O. Box 960061 When was the debt incurred? Orlando, FL 32896-0061 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.2 Synchrony Bank/JCP 4101 \$2,057.26 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 960090 When was the debt incurred? Orlando, FL 32896-0090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.2 **Target Card Services** 0961 \$1,150,00 Last 4 digits of account number 8 Nonpriority Creditor's Name P.O. Box 660170 When was the debt incurred? Dallas, TX 75266-0170 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

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| Debi     | Karen Castie   |   | Case number (if know)                        |            |  |
|----------|--|---|--|------------|--|
| 4.2<br>9 | Tempoe LLC   | Last 4 digits of account number   | 8712   | \$1,020.00 |  |
|          | Nonpriority Creditor's Name c/o Security Credit Services LLC 2623 W. Oxford Loop, #108 Oxford, MS 38655                      | When was the debt incurred?   |  |            |  |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the claim is   | s: Check all that apply                      |            |  |
|          | Debtor 1 only  | Contingent  |  |            |  |
|          | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only   | ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:                                  |  |            |  |
|          | ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No | ☐ Student loans   | ration agreement or divorce that you did not |            |  |
|          | Yes  | Other. Specify Collection   |  |            |  |
| 4.3<br>0 | Tempoe LLC   | Last 4 digits of account number   | 9076   | \$801.00   |  |
|          | Nonpriority Creditor's Name c/o Security Credit Services LLC 2623 W. Oxford Loop, #108 Oxford, MS 38655                      | When was the debt incurred?   |  |            |  |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the claim is   |  |            |  |
|          | ■ Debtor 1 only  | Contingent  |  |            |  |
|          | Debtor 2 only  | Unliquidated  |  |            |  |
|          | Debtor 1 and Debtor 2 only   | Disputed  |  |            |  |
|          | $\square$ At least one of the debtors and another  | _   | Type of NONPRIORITY unsecured claim:         |            |  |
|          | ☐ Check if this claim is for a community debt  Is the claim subject to offset?   | ☐ Student loans ☐ Obligations arising out of a separ report as priority claims                  |  |            |  |
|          | No   | Debts to pension or profit-sharing  |  |            |  |
|          | Yes  | Other. Specify Collection   |  |            |  |
| 4.3      | Walmart/Synchrony Bank   | Look & divide of account assumb   | 7934   | \$1,612.78 |  |
| 1        | Nonpriority Creditor's Name P.O. Box 530927 Atlanta, GA 30353-0927   | Last 4 digits of account number When was the debt incurred?                                     |  | Ψ1,012.70  |  |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim is: Check all that apply                                     |  |            |  |
|          | Debtor 1 only  | ☐ Contingent  |  |            |  |
|          | ☐ Debtor 2 only  | ☐ Unliquidated  |  |            |  |
|          | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |  |            |  |
|          | $\square$ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:  |  |            |  |
|          | ☐ Check if this claim is for a community debt  | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not |  |            |  |
|          | Is the claim subject to offset?  | report as priority claims   |  |            |  |
|          | ■ No   | Debts to pension or profit-sharing plans, and other similar debts                               |  |            |  |
|          | ☐ Yes  | ■ Other. Specify Charge Account   |  |            |  |

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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| Debtor 1 Karen Castle  |  | Case number (if know)   |
|--|--|---|
| Name and Address<br>Bleeker, Brody & Andrews<br>9247 N. Meridian Street, Suite 101<br>Indianapolis, IN 46260 | On which entry in Part 1 or Part 2 did Line 4.15 of (Check one):  Last 4 digits of account number          | you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| Name and Address Cavalry Portfolio Services, LLC P.O. Box 27288 Tempe, AZ 85282-7288                         | On which entry in Part 1 or Part 2 did Line 4.26 of ( <i>Check one</i> ):  Last 4 digits of account number | you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims    |
| Name and Address<br>Client Services, Inc<br>PO Box 1503<br>Saint Peters, MO 63376                            | On which entry in Part 1 or Part 2 did Line 4.14 of ( <i>Check one</i> ):  Last 4 digits of account number | you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims    |
| Name and Address Client Services, Inc PO Box 1503 Saint Peters, MO 63376                                     | On which entry in Part 1 or Part 2 did Line 4.5 of (Check one):  Last 4 digits of account number           | you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims    |
| Name and Address Convergent Outsourcing, Inc. PO Box 9004 Renton, WA 98057                                   | On which entry in Part 1 or Part 2 did Line 4.25 of (Check one):  Last 4 digits of account number          | you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims    |
| Name and Address<br>Credit Control, LLC<br>PO Box 546<br>Hazelwood, MO 63042                                 | On which entry in Part 1 or Part 2 did Line 4.4 of (Check one):  Last 4 digits of account number           | you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims    |
| Name and Address Enhanced Recovery Company P.O. Box 57547 Jacksonville, FL 32241                             | On which entry in Part 1 or Part 2 did Line 4.3 of (Check one):  Last 4 digits of account number           | you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims    |
| Name and Address FBCS Services 330 S. Warminster Road, Suite 353 Hatboro, PA 19040                           | On which entry in Part 1 or Part 2 did Line 4.16 of (Check one):  Last 4 digits of account number          | you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims    |
| Name and Address Financial Recovery Services P.O. Box 385908 Minneapolis, MN 55438                           | On which entry in Part 1 or Part 2 did Line 4.12 of ( <i>Check one</i> ):  Last 4 digits of account number | you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims    |
| Name and Address<br>Halsted Financial Services, LLC<br>PO Box 828<br>Skokie, IL 60076                        | On which entry in Part 1 or Part 2 did Line 4.21 of ( <i>Check one</i> ):  Last 4 digits of account number | you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims    |
| Name and Address<br>Heavner, Beyers & Mihlar, LLC<br>PO Box 740<br>Decatur, IL 62525                         | On which entry in Part 1 or Part 2 did Line 4.15 of ( <i>Check one</i> ):  Last 4 digits of account number | you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims    |
| Name and Address<br>I.C. System, Inc.<br>444 Highway 96 East, Box 64378<br>St. Paul, MN 55164-0378           | On which entry in Part 1 or Part 2 did Line 4.11 of (Check one):   | you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims    |

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| Debior i Karen Castie  |  | Case number (if know)  |   |
|--|--|--|---|
|  | Last 4 digits of account number  |  |   |
| Name and Address<br>Jefferson Capital Systems, LLC<br>16 McLeland Road<br>Saint Cloud, MN 56303                    | On which entry in Part 1 or Part 2 did Line <b>4.1</b> of ( <i>Check one</i> ):                                  | you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims |   |
|  | Last 4 digits of account number  |  |   |
| Name and Address<br>Lvnv Funding, LLC.<br>c/o Resurgent Capital Services<br>P.O. Box 10497<br>Greenville, SC 29603 | On which entry in Part 1 or Part 2 did Line 4.10 of (Check one):  Last 4 digits of account number                | you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims |   |
|  |  |  |   |
| Name and Address  Medical Business Bureau  P.O. Box 1219  Park Ridge, IL 60068-7219                                | On which entry in Part 1 or Part 2 did Line 4.22 of (Check one):  Last 4 digits of account number                | you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims |   |
| Name and Address<br>Medical Business Bureau<br>P.O. Box 1219<br>Park Ridge, IL 60068-7219                          | On which entry in Part 1 or Part 2 did Line 4.23 of ( <i>Check one</i> ):  Last 4 digits of account number       | you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims |   |
| Name and Address<br>Midland Credit Management, Inc<br>P.O. Box 60578<br>Los Angeles, CA 90060-0578                 | On which entry in Part 1 or Part 2 did Line 4.13 of (Check one):  Last 4 digits of account number                | you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims     |   |
| Name and Address<br>MRS Associates<br>1930 Olney Avenue<br>Cherry Hill, NJ 08003                                   | On which entry in Part 1 or Part 2 did Line <b>4.8</b> of ( <i>Check one</i> ):  Last 4 digits of account number | you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims     |   |
| Name and Address Nationwide Credit & Collection Inc.   | On which entry in Part 1 or Part 2 did Line <b>4.22</b> of ( <i>Check one</i> ):                                 | you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  | _ |
| 815 Commerce Drive, Suite 270<br>Oak Brook, IL 60523   | Last 4 digits of account number  | Part 2: Creditors with Nonpriority Unsecured Claims  |   |
| Name and Address   |  | Eat the entire of each than 0  |   |
| Name and Address Nationwide Credit & Collection Inc. 815 Commerce Drive, Suite 270 Oak Brook, IL 60523             | On which entry in Part 1 or Part 2 did Line 4.24 of (Check one):   | □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims                                   |   |
|  | Last 4 digits of account number  |  |   |
| Name and Address<br>NCA<br>P.O. Box 550327<br>W. Fourth Street<br>Hutchinson, KS 67504-0550                        | On which entry in Part 1 or Part 2 did Line <b>4.21</b> of ( <i>Check one</i> ):                                 | you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims   |   |
| Tidle11113011, NO 07304-0330   | Last 4 digits of account number  |  |   |
| Name and Address<br>NCB Management Services<br>1 Allied Drive<br>Trevose, PA 19053                                 | On which entry in Part 1 or Part 2 did Line 4.19 of (Check one):   | you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims     |   |
|  | Last 4 digits of account number  |  |   |
| Name and Address<br>Northland Group, Inc.<br>P.O. Box 390905<br>Minneapolis, MN 55439                              | On which entry in Part 1 or Part 2 did Line 4.14 of (Check one):  Last 4 digits of account number                | you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims |   |
|  | Last + digits of accoult Hullipel  |  |   |

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| Debtor 1 Karen Castle   | Document Page   | 2 38 OT 72<br>Case number (if know)  |
|---|---|--|
| Name and Address Northstar Location Services LLC ATTN: Financial Services Dept. P.O. Box 49 Bowmansville, NY 14026-0049 | On which entry in Part 1 or Part 2 did Line <b>4.12</b> of ( <i>Check one</i> ):  Last 4 digits of account number | you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims |
|   | •   |  |
| Name and Address Phillips & Cohen Associates Ltd. 1002 Justison Street Wilmington DE 10001                              | On which entry in Part 1 or Part 2 did Line 4.16 of (Check one):  | you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims     |
| Wilmington, DE 19801  | Last 4 digits of account number   |  |
| Name and Address Portfolio Recovery Associates, LLC P.O. Box 12914 Norfolk, VA 23541                                    | On which entry in Part 1 or Part 2 did Line 4.31 of (Check one):  Last 4 digits of account number                 | you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims     |
| Name and Address  |   | vov liet the existed exaditor?   |
| Portfolio Recovery Associates, LLC P.O. Box 12914   | On which entry in Part 1 or Part 2 did Line 4.27 of (Check one):  | Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims                                      |
| Norfolk, VA 23541   | Last 4 digits of account number   |  |
| Name and Address<br>Portfolio Recovery Associates, LLC<br>P.O. Box 12914<br>Norfolk, VA 23541                           | On which entry in Part 1 or Part 2 did Line 4.5 of (Check one):  Last 4 digits of account number                  | you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims     |
| Name and Address  | On which entry in Part 1 or Part 2 did  |  |
| Tate & Kirlin Associates, Inc. 580 Middletown Blvd., Suite 240  | Line 4.2 of (Check one):  | Part 1: Creditors with Priority Unsecured Claims   |
| Langhorne, PA 19047   | Last 4 digits of account number   | Part 2: Creditors with Nonpriority Unsecured Claims  |
| N   |   | rad and a second   |
| Name and Address The Bureaus  | On which entry in Part 1 or Part 2 did Line <b>4.6</b> of (Check one):  | you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  |
| 650 Dundee Road, Suite 370<br>Northbrook, IL 60062  | <del></del> ,   | Part 2: Creditors with Nonpriority Unsecured Claims  |
| HOI HISTOOK, IL OUUUZ   | Last 4 digits of account number   |  |

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|              |     |   |     | Total Claim     |
|--------------|-----|---|-----|-----------------|
|              | 6a. | Domestic support obligations  | 6a. | \$<br>0.00      |
| Total claims |     |   |     |                 |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$<br>0.00      |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$<br>0.00      |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$<br>0.00      |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$<br>0.00      |
|              |     |   |     | Total Claim     |
|              | 6f. | Student loans   | 6f. | \$<br>0.00      |
| Total claims |     |   |     |                 |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$<br>0.00      |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$<br>0.00      |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$<br>48,046.85 |
|              | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$<br>48,046.85 |

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|   |                         |                   | 111 FAUE 33 UL 17 |                     |
|---|-------------------------|-------------------|-------------------|---------------------|
| Fill in this infor                      | mation to identify your | case:             |                   |                     |
| Debtor 1                                | Karen Castle            |                   |                   |                     |
|   | First Name              | Middle Name       | Last Name         |                     |
| Debtor 2                                |                         |                   |                   |                     |
| (Spouse if, filing)                     | First Name              | Middle Name       | Last Name         |                     |
| United States Bankruptcy Court for the: |                         | NORTHERN DISTRICT | OF ILLINOIS       |                     |
| Case number                             |                         |                   |                   |                     |
| (if known)                              |                         |                   |                   | Check if this is an |

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with | n whom you have the c | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|-----------------------|-------------------|---|
| 2.1 |           |              |                       |                   |   |
|     | Name      |              |                       |                   | _                                       |
|     | Number    | Street       |                       |                   | _                                       |
|     | City      |              | State                 | ZIP Code          | _                                       |
| 2.2 |           |              |                       |                   |   |
|     | Name      |              |                       |                   | _                                       |
|     | Number    | Street       |                       |                   | _                                       |
|     | City      |              | State                 | ZIP Code          | _                                       |
| 2.3 | <u> </u>  |              | <u> </u>              |                   |   |
|     | Name      |              |                       |                   | _                                       |
|     | Number    | Street       |                       |                   | _                                       |
|     | City      |              | State                 | ZIP Code          | _                                       |
| 2.4 | 0.1.5     |              | 0.0.0                 | 2.1. 0000         |   |
| 2.4 | Name      |              |                       |                   | _                                       |
|     | Number    | Street       |                       |                   | _                                       |
|     | City      |              | State                 | ZIP Code          | _                                       |
| 2.5 |           |              |                       |                   |   |
|     | Name      |              |                       |                   | _                                       |
|     | Number    | Street       |                       |                   | _                                       |
|     | City      |              | State                 | ZIP Code          | _                                       |
|     | - ity     |              | Cidio                 |                   |   |

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|                                 |   | 1706.111116   | III Paue 40 C                              | 11 / /  |  |
|---------------------------------|---|---|--|---|--|
| Fill in this in                 | nformation to identify your   | case:   |  |   |  |
| Debtor 1                        | Karen Castle  |   |  |   |  |
|                                 | First Name  | Middle Name   | Last Name                                  |   |  |
| Debtor 2<br>(Spouse if, filing) | ) First Name  | Middle Name   | Last Name                                  |   |  |
| United State                    | es Bankruptcy Court for the:  | NORTHERN DISTRICT   | OF ILLINOIS                                |   |  |
| 0                               |   | -   |  |   |  |
| Case number                     | er  |   |  |   | ☐ Check if this is an amended filing   |
|                                 | Form 106H<br>ule H: Your Code   | ebtors  |  |   | 12/15  |
| 1. Do yo ■ No □ Yes 2. Withi    | d number the entries in the ind case number (if known) ou have any codebtors? (If you have any codebtors) (If you | . Answer every question you are filing a joint case, where the case is a community pr | do not list either spouse                  | as a codebtor.  y? (Community property sta                | any Additional Pages, write  |
| ☐ Yes.  3. In Columnin line 2   | 2 again as a codebtor only it<br>06D), Schedule E/F (Official   | ors. Do not include your<br>f that person is a guaran                                 | spouse as a codebtor tor or cosigner. Make | sure you have listed the c                                | th you. List the person shown<br>reditor on Schedule D (Official<br>edule E/F, or Schedule G to fill |
|                                 | olumn 1: Your codebtor<br>Ime, Number, Street, City, State and ZI   | P Code  |  | Column 2: The creditor<br>Check all schedules th          | or to whom you owe the debt at apply:  |
|                                 | ame<br>umber Street<br>tv   | State   | ZIP Code                                   | ☐ Schedule D, line☐ Schedule E/F, line☐ Schedule G, line☐ |  |
|                                 |   |   |  |   |  |
| 3.2 Na                          | ame   |   |  | ☐ Schedule D, line☐ Schedule E/F, line☐ Schedule G, line☐ |  |
| Nu<br>Ci                        | umber Street<br>ty  | State   | ZIP Code                                   | _   |  |

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| Fill in this information t      | o identify your case:                            |  |
|---------------------------------|--|--|
| Debtor 1                        | Karen Castle                                     |  |
| Debtor 2<br>(Spouse, if filing) |  |  |
| United States Bankrup           | tcy Court for the: NORTHERN DISTRICT OF ILLINOIS |  |
| Case number(If known)           |  | Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter |
| Official Form                   | 106l<br>Your Income                              | 13 income as of the following date:  MM / DD/ YYYY                                 |

#### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### **Describe Employment** Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. ☐ Employed If you have more than one job, Employed **Employment status** attach a separate page with Not employed ■ Not employed information about additional employers. Occupation **Assistant Operator** Unemployed Include part-time, seasonal, or Packaging Corporation of self-employed work. Employer's name America Occupation may include student or homemaker, if it applies. **Employer's address** 1955 West Field Court Lake Forest, IL 60045 How long employed there? 7 Years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or

|    |  |    |      |          | non- | filing spouse |
|----|--|----|------|----------|------|---------------|
| 2. | <b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | 2. | \$_  | 4,770.83 | \$   | 0.00          |
| 3. | Estimate and list monthly overtime pay.  | 3. | +\$_ | 0.00     | +\$  | 0.00          |
| 4. | Calculate gross Income. Add line 2 + line 3.   | 4. | \$_  | 4,770.83 | \$   | 0.00          |

Official Form 106I Schedule I: Your Income page 1

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| Deb | tor 1         | Karen Castle   | _      | С  | ase number (if know | n)       |      |                     |       |   |
|-----|---------------|--|--------|----|---------------------|----------|------|---------------------|-------|---|
|     |               |  |        |    |                     |          |      |                     |       |   |
|     |               |  |        |    | For Debtor 1        |          |      | Debtor 2 of         |       |   |
|     | Cop           | y line 4 here  | 4.     |    | \$ 4,770.8          | 3        | \$   |                     | 0.00  |   |
| 5.  | List          | all payroll deductions:  |        |    |                     |          |      |                     |       |   |
|     | 5a.           | Tax, Medicare, and Social Security deductions  | 5a.    |    | \$ 1,097.9          | 4        | \$   |                     | 0.00  |   |
|     | 5b.           | Mandatory contributions for retirement plans   | 5b.    |    | \$ 0.0              |          | \$   |                     | 0.00  |   |
|     | 5c.           | Voluntary contributions for retirement plans   | 5c.    |    | \$ 0.0              |          | \$   |                     | 0.00  |   |
|     | 5d.           | Required repayments of retirement fund loans   | 5d.    |    | \$ 0.0              | _        | \$   |                     | 0.00  |   |
|     | 5e.           | Insurance  | 5e.    |    | \$ 305.2            | 0        | \$   |                     | 0.00  |   |
|     | 5f.           | Domestic support obligations   | 5f.    |    | \$ 0.0              | 0        | \$   |                     | 0.00  |   |
|     | 5g.           | Union dues   | 5g.    |    | \$ 48.9             | 2        | \$   |                     | 0.00  |   |
|     | 5h.           | Other deductions. Specify:   | 5h     | +  | \$                  | 0        | + \$ |                     | 0.00  |   |
| 6.  | Add           | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.     | 5  | \$1,452.0           | 6        | \$   |                     | 0.00  |   |
| 7.  | Cald          | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.     | 5  | \$3,318.7           | 7_       | \$   |                     | 0.00  |   |
| 8.  | List<br>8a.   | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total            |        |    |                     |          |      |                     |       |   |
|     |               | monthly net income.  | 8a.    |    | \$ 0.0              | 0        | \$   |                     | 0.00  |   |
|     | 8b.           | Interest and dividends   | 8b.    |    | \$ 0.0              | 0        | \$   |                     | 0.00  |   |
|     | 8c.           | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   | 8c.    |    | \$ 0.0              | Λ        | \$   |                     | 0.00  |   |
|     | 8d.           | Unemployment compensation  | 8d.    |    | \$ 0.0<br>\$        |          | \$   |                     | 0.00  |   |
|     | 8e.           | Social Security  | 8e.    |    | \$ 0.0              |          | \$   |                     | 0.00  |   |
|     | 8f.           | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f.    |    | \$                  | 0        | \$   |                     | 0.00  |   |
|     | 8g.           | Pension or retirement income   | 8g.    |    | \$ 0.0              | _        | \$   |                     | 0.00  |   |
|     | 8h.           | Other monthly income. Specify:   | 8h.    | +  | \$0.0               | 0        | + \$ |                     | 0.00  |   |
| 9.  | Add           | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.     | \$ | 0.0                 | 0        | \$   |                     | 0.00  |   |
| 10. | Calo          | culate monthly income. Add line 7 + line 9.  | 10. \$ | 5  | 3,318.77 +          | \$       |      | 0.00 =              | \$    | 3,318.77                                |
|     |               | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   |        |    | 5,51011             | <u> </u> |      |                     |       | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 11. | Inclu<br>othe | e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not cify:  | deper  |    | . ,                 |          |      | chedule J.<br>11. • |       | 0.00                                    |
| 12. |               | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies  |        |    |                     |          |      | 12.                 | ombin | 3,318.77                                |
|     | _             |  | _      |    |                     |          |      | _                   |       | / income                                |
| 13. | Do y          | you expect an increase or decrease within the year after you file this form  | ?      |    |                     |          |      |                     |       |   |
|     |               | No.<br>Yes. Explain:   |        |    |                     |          |      |                     |       |   |

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| Fill | in this information                                      | n to identify yo | our case:              |   |   |                           |   |   |
|------|--|------------------|------------------------|---|---|---------------------------|---|---|
| Deb  | otor 1 <b>K</b>  | aren Castle      | )                      |   |   | Che                       | eck if this is:                           |   |
|      | otor 2 ouse, if filing)                                  |                  |                        |   |   |                           |   | wing postpetition chapter the following date: |
| Unit | ted States Bankrupto                                     | cy Court for the | : NORTH                | IERN DISTRICT OF ILLIN  | OIS   |                           | MM / DD / YYYY                            |   |
|      | se number  | ,                |                        |   |   |                           |   |   |
|      | nown)  |                  |                        |   |   |                           |   |   |
| 0    | fficial Forn   | n 106J           |                        |   |   |                           |   |   |
| S    | chedule J  | : Your           | Exper                  | ises  |   |                           |   | 12/15   |
| info | as complete and<br>ormation. If more<br>mber (if known). | space is ne      | eded, atta             | If two married people ar<br>ch another sheet to this<br>n.                | e filing together, b<br>form. On the top of | oth are eq<br>f any addit | ually responsible f<br>ional pages, write | or supplying correct<br>your name and case    |
|      |  | Your House       | hold                   |   |   |                           |   |   |
| 1.   | Is this a joint c  No. Go to lin                         |                  |                        |   |   |                           |   |   |
|      |  |                  | in a separ             | ate household?  |   |                           |   |   |
|      | □ No   |                  |                        |   |   |                           |   |   |
|      | ☐ Yes.   | Debtor 2 mus     | st file Offici         | al Form 106J-2, <i>Expenses</i>   | for Separate House                          | ehold of De               | btor 2.                                   |   |
| 2.   | Do you have de   | ependents?       | ■ No                   |   |   |                           |   |   |
|      | Do not list Debt<br>Debtor 2.                            | or 1 and         | ☐ Yes.                 | Fill out this information for each dependent                              | Dependent's relat<br>Debtor 1 or Debto      |                           | Dependent's age                           | Does dependent live with you?                 |
|      | Do not state the   |                  |                        |   |   |                           |   | □ No  |
|      | dependents nar   | nes.             |                        |   |   |                           |   | ☐ Yes<br>☐ No                                 |
|      |  |                  |                        |   |   |                           |   | ☐ Yes   |
|      |  |                  |                        |   |   |                           |   | □ No  |
|      |  |                  |                        |   |   |                           | _   | ☐ Yes   |
|      |  |                  |                        |   |   |                           |   | □ No<br>□ Yes                                 |
| 3.   | Do your expen  |                  | _                      | No  |   |                           |   |   |
|      | expenses of pe   |                  |                        | Yes   |   |                           |   |   |
| D-   | <u> </u>   | -                |                        | <b></b>   |   |                           |   |   |
| Est  |  | nses as of yo    | our bankrı             | y Expenses<br>uptcy filing date unless y<br>y is filed. If this is a supp |   |                           |   |   |
| the  | lude expenses p<br>value of such a<br>ficial Form 106l.  | ssistance an     | non-cash<br>d have inc | government assistance i<br>luded it on <i>Schedule I:</i> \               | f you know<br>our Income                    |                           | Your exp                                  | penses  |
|      |  |                  |                        |   |   |                           |   |   |
| 4.   | The rental or h payments and a                           |                  |                        | ses for your residence. I<br>r lot.                                       | nclude first mortgag                        | e<br>4.                   | \$  | 535.57  |
|      | If not included  | in line 4:       |                        |   |   |                           |   |   |
|      | 4a. Real esta  |                  |                        |   |   | 4a.                       |   | 242.00  |
|      |  | homeowner's      |                        |   |   | 4b.                       |   | 29.00   |
|      |  |                  |                        | upkeep expenses<br>dominium dues  |   | 4c.<br>4d.                |   | 0.00<br>0.00                                  |
| 5.   |  |                  |                        | <b>our residence.</b> such as ho  | me equity loans                             | 5.                        | ·   | 0.00  |

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| Debtor 1        | Karen Castle   | Case num     | ber (if known) |                           |
|-----------------|--|--------------|----------------|---------------------------|
| 6. <b>Utili</b> | ties:  |              |                |                           |
| 6a.             | Electricity, heat, natural gas   | 6a.          | \$             | 100.00                    |
| 6b.             | Water, sewer, garbage collection   | 6b.          | ·              | 65.00                     |
| 6c.             | Telephone, cell phone, Internet, satellite, and cable services   | 6c.          | \$             | 370.00                    |
| 6d.             | Other. Specify:  | 6d.          |                | 0.00                      |
|                 | d and housekeeping supplies  | 7.           |                | 250.00                    |
|                 | dcare and children's education costs   | 8.           | \$             |                           |
| _               |  | 9.           | \$             | 0.00<br>17.20             |
|                 | hing, laundry, and dry cleaning  |              | *              |                           |
|                 | sonal care products and services   | 10.          | ·              | 0.00                      |
|                 | lical and dental expenses  | 11.          | \$             | 0.00                      |
|                 | nsportation. Include gas, maintenance, bus or train fare.  | 12.          | ¢              | 225.00                    |
|                 | not include car payments.  | 13.          | ·              |                           |
|                 | ertainment, clubs, recreation, newspapers, magazines, and books  |              |                | 0.00                      |
|                 | ritable contributions and religious donations  | 14.          | \$             | 0.00                      |
|                 | irance.  |              |                |                           |
|                 | not include insurance deducted from your pay or included in lines 4 or 20.   | 45-          | ¢              | 0.00                      |
|                 | Life insurance   | 15a.         |                | 0.00                      |
|                 | Health insurance   | 15b.         | ·              | 0.00                      |
|                 | Vehicle insurance  | 15c.         |                | 200.00                    |
|                 | Other insurance. Specify:  | 15d.         | \$             | 0.00                      |
|                 | es. Do not include taxes deducted from your pay or included in lines 4 or 20.  |              |                |                           |
| Spec            | cify:  | 16.          | \$             | 0.00                      |
|                 | allment or lease payments:   |              |                |                           |
| 17a.            | Car payments for Vehicle 1   | 17a.         | \$             | 0.00                      |
| 17b.            | Car payments for Vehicle 2   | 17b.         | \$             | 0.00                      |
| 17c.            | Other. Specify:  | 17c.         | \$             | 0.00                      |
|                 | Other. Specify:  | 17d.         | \$             | 0.00                      |
|                 | r payments of alimony, maintenance, and support that you did not report  |              | ·              |                           |
|                 | ucted from your pay on line 5, Schedule I, Your Income (Official Form 106  |              | \$             | 0.00                      |
|                 | er payments you make to support others who do not live with you.   | -,-          | \$             | 0.00                      |
| Spec            |  | 19.          | · —            |                           |
|                 | er real property expenses not included in lines 4 or 5 of this form or on So   |              | ur Income.     |                           |
|                 | Mortgages on other property  | 20a.         |                | 0.00                      |
|                 | Real estate taxes  | 20b.         |                | 0.00                      |
|                 | Property, homeowner's, or renter's insurance   | 20c.         | ·              | 0.00                      |
|                 | Maintenance, repair, and upkeep expenses   | 20d.         |                |                           |
|                 |  | 20u.<br>20e. |                | 0.00                      |
|                 | Homeowner's association or condominium dues  |              | ·              | 0.00                      |
|                 | er: Specify: Auto Repairs & Maintenance  | 21.          | · <u> </u>     | 50.00                     |
| Pete            | care   |              | +\$            | 50.00                     |
| Colo            | culate your monthly expenses   |              |                |                           |
|                 | Add lines 4 through 21.  |              | ¢              | 2 422 77                  |
|                 |  | 2            | \$             | 2,133.77                  |
|                 | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-   | <b>Z</b>     | \$             |                           |
| 22c.            | Add line 22a and 22b. The result is your monthly expenses.   |              | \$             | 2,133.77                  |
| Cala            | ulata vaur manthly nat inacma  |              |                |                           |
|                 | culate your monthly net income.  | 00.5         | <b>c</b>       | 0.040 ==                  |
|                 | Copy line 12 (your combined monthly income) from Schedule I.   | 23a.         |                | 3,318.77                  |
| 23b.            | Copy your monthly expenses from line 22c above.  | 23b.         | -\$            | 2,133.77                  |
|                 |  |              |                |                           |
| 23c.            | Subtract your monthly expenses from your monthly income.   | 220          | \$             | 1,185.00                  |
|                 | The result is your monthly net income.   | 23c.         | Ψ              | 1,100.00                  |
| For e           | you expect an increase or decrease in your expenses within the year after example, do you expect to finish paying for your car loan within the year or do you expect y fication to the terms of your mortgage? |              |                | se or decrease because of |
| ■ N             |  |              |                |                           |
| $\square$ Y     | res. Explain here:   |              |                |                           |
|                 |  |              |                |                           |

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| Fill in this infor              | mation to identify your  | case:                      |                             |                         |  |
|---------------------------------|--------------------------|----------------------------|-----------------------------|-------------------------|--|
| Debtor 1                        | Karen Castle             |                            |                             |                         |  |
|                                 | First Name               | Middle Name                | Last Name                   |                         |  |
| Debtor 2<br>(Spouse if, filing) | First Name               | Middle Name                | Last Name                   |                         |  |
| (Spouse II, IIIIIIg)            | riist Name               | Middle Name                | Last Name                   |                         |  |
| United States Ba                | ankruptcy Court for the: | NORTHERN DISTRICT          | OF ILLINOIS                 |                         |  |
| Case number                     |                          |                            |                             |                         |  |
| (if known)                      |                          |                            |                             |                         | ☐ Check if this is an  |
|                                 |                          |                            |                             |                         | amended filing   |
|                                 |                          |                            |                             |                         |  |
| o                               | 4000                     |                            |                             |                         |  |
| Official Forr                   |                          |                            |                             |                         |  |
| <b>Declarat</b>                 | tion About a             | ın Individual              | <b>Debtor's Sc</b>          | hedules                 | 12/15  |
|                                 |                          |                            |                             |                         |  |
| If two married pe               | eople are filing togethe | r, both are equally respor | nsible for supplying corr   | ect information.        |  |
| Vou must file thi               | is form whonover you fi  | lo hankruntov schodulos    | or amonded schedules        | Making a falso state    | ement, concealing property, or   |
|                                 |                          |                            |                             |                         | 00, or imprisonment for up to 20   |
|                                 | 8 U.S.C. §§ 152, 1341, 1 |                            | .,,                         |                         | ,                                    |
|                                 |                          |                            |                             |                         |  |
| 9.                              |                          |                            |                             |                         |  |
| Sig                             | n Below                  |                            |                             |                         |  |
|                                 |                          |                            |                             |                         |  |
| Did you pa                      | ly or agree to pay some  | one who is NOT an attorr   | ney to help you till out ba | ankruptcy forms?        |  |
| ■ No                            |                          |                            |                             |                         |  |
| _                               |                          |                            |                             |                         |  |
| ☐ Yes. I                        | Name of person           |                            |                             |                         | kruptcy Petition Preparer's Notice,<br>, and Signature (Official Form 119) |
|                                 |                          |                            |                             | Deciaration             | , and Signature (Official Form 119)  |
|                                 |                          |                            |                             |                         |  |
|                                 |                          | that I have read the sumr  | mary and schedules filed    | d with this declaration | on and   |
| that they ar                    | e true and correct.      |                            |                             |                         |  |
| X /s/ Kar                       | en Castle                |                            | X                           |                         |  |
|                                 | Castle                   |                            | Signature of I              | Debtor 2                |  |
| Signatu                         | re of Debtor 1           |                            |                             |                         |  |

Date \_\_\_\_\_

Date **July 24, 2018** 

| Statement of Financial Affairs for Individuals Filing for Bankruptcy  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married Not married  2. During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 lived there  3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2  Explain the Sources of Your Income  |       |                                    |                           |                                |                                |                               |                      |
|--|-------|------------------------------------|---------------------------|--------------------------------|--------------------------------|-------------------------------|----------------------|
| Debtor 2   Shower   Middle Name   Lest Name   Debtor 2   Shower   Sh   | Filli | in this inform                     | nation to identify you    | r case:                        |                                |                               |                      |
| Debtor 2   Speciment, Riving   First Name   Middle Name   Last Name  | Deb   | tor 1                              | Karen Castle              |                                |                                |                               |                      |
| Check if this is an amended filing   |       |                                    | First Name                | Middle Name                    | Last Name                      |                               |                      |
| Case number   Check if this is an amended filing   Check if this is an amended filing  |       |                                    | First Name                | Middle Name                    | Last Name                      |                               |                      |
| Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  4/10  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Fart 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?    Married  | Unit  | ed States Bar                      | nkruptcy Court for the:   | NORTHERN DISTRICT              | OF ILLINOIS                    |                               |                      |
| Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  4/10  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Fart 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?    Married  | Cas   | e number                           |                           |                                |                                |                               |                      |
| Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  4/16  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part : Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married    Not married   During the last 3 years, have you lived anywhere other than where you live now?    No  |       |                                    |                           |                                |                                | _                             |                      |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1:   Give Details About Your Marital Status and Where You Lived Before   |       |                                    |                           |                                |                                |                               | inionaca ming        |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1:   Give Details About Your Marital Status and Where You Lived Before   | ○tt   | ioial Ear                          | rm 107                    |                                |                                |                               |                      |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?    Married   |       |                                    |                           | Affaina fan Indiini            | duala Filima fan F             | ) =                           |                      |
| information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?    Married   Not married     Not married     No   Yes. List all of the places you lived in the last 3 years. Do not include where you live now.    Debtor 1 Prior Address:   Dates Debtor 1   Debtor 2 Prior Address:   Dates Debtor 2   lived there  |       |                                    |                           |                                |                                | <u> </u>                      |                      |
| Sive Details About Your Marital Status and Where You Lived Before  |       |                                    |                           |                                |                                |                               |                      |
| Married Not married  During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1   Debtor 2 Prior Address: Dates Debtor 2   lived there    No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1   Debtor 2 Prior Address: Dates Debtor 2   lived there    No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2   Explain the Sources of Your Income  Did you have any income from employment or from operating a business during this year or the two previous calendar years? If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1   Sources of income   Check all that apply.   Debtor 2   Sources of income   Check all that apply.   Debtor 2   Sources of income   Check all that apply.   Debtor 2   Sources of income   Check all that apply.   Debtor 3   Sources of income   Check all that apply.   Debtor 4   Wages, commissions, bonuses, tips   Debtor 5   Wages, commissions, bonuses, tips   Debtor 6   Wages, commissions, bonuses, tips   Debtor 7   Wages, commissions, bonuses, tips   Debtor 8   Wages, commissions, bonuses, tips   Debtor 9   Wages, commissions, bonuses, ti |       |                                    |                           |                                | tills form. On the top of an   | y additional pages, write you | ii iidiile diid case |
| Married Not married  During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1   Debtor 2 Prior Address: Dates Debtor 2   Iived there    No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 2   Iived there    No   Address: Dates Debtor 2   Iived there    No   Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2   Explain the Sources of Your Income  Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No   Yes. Fill in the details.  Debtor 1   Sources of income   Check all that apply.   Sources of income | Part  | Give D                             | etails About Your Ma      | rital Status and Where Yo      | ı Lived Before                 |                               |                      |
| Married Not married  During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Dived there  3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Debtor 2 Sources of income Check all that apply.  (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  |       |                                    |                           |                                | 21100 201010                   |                               |                      |
| During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 lived there  Debtor 2 Prior Address: Dates Debtor 2 lived there  No Yes. Address: Dates Debtor 1 lived there  Debtor 2 Prior Address: Dates Debtor 2 lived there  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  Debtor 1 Sources of income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Check all that apply.  Wages, commissions, bonuses, tips  No Wages, commissions, bonuses, tips  Dates Debtor 2 Prior Address: Dates Debtor 2 Relative diverses: Dates Debtor 2 Relative diverses: Dates Debtor 2 Relative diverses: Dates Debtor 2 Sources of income Check all that apply.  Debtor 1 Sources of income Check all that apply.  Sources of income Check all that apply.  Debtor 2 Sources of income Check all that apply.  Debtor 3 Sources of income Check all that apply.  Debtor 4 Sources of income Check all that apply.  Debtor 3 Sources of income Check all that apply.  Debtor 4 Sources of income Check all that apply.  Debtor 3 Sources of income Check all that apply.  Debtor 4 Sources of income Check all that apply.  Debtor 5 Sources of income Check all that apply.  Debtor 6 Debtor 9 Deb  | 1.    | What is your                       | current marital statu     | IS?                            |                                |                               |                      |
| ■ No   |       | _                                  | ried                      |                                |                                |                               |                      |
| ■ No   | 2.    | During the la                      | ast 3 years, have you     | lived anywhere other than      | where you live now?            |                               |                      |
| Debtor 1 Prior Address:  Dates Debtor 1   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2   Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 3   Debtor 4   Debtor 5   Debtor 6   Debtor 7   Debtor 7   Debtor 8   Debtor 9   |       | za mg mo ic                        | ioi o youro, navo you     | involution of the time.        | mioro you iivo noii .          |                               |                      |
| Debtor 1 Prior Address:  Dates Debtor 1 lived there  Debtor 2 Prior Address: Dates Debtor 2 lived there  Debtor 2 Prior Address: Dates Debtor 2 lived there  Dates Debtor 1 Sources of Income (Defore deductions and exclusions)  Debtor 1 Sources of income (Defore deductions and exclusions)  Prom January 1 of current year until the date you filed for bankruptcy:  Dates Debtor 1 Sources of income (Defore deductions and exclusions)  Sources of income (Defore deductions and exclusions)  Dates Debtor 2 Sources of income (Defore deductions and exclusions)  Debtor 2 Sources of income (Defore deductions and exclusions)  Debtor 2 Sources of income (Defore deductions and exclusions)  Debtor 2 Sources of income (Defore deductions and exclusions)  Debtor 2 Sources of income (Defore deductions and exclusions)  Debtor 2 Sources of income (Defore deductions and exclusions)  Debtor 2 Sources of income (Defore deductions and exclusions)   |       | _                                  |                           |                                |                                |                               |                      |
| lived there   lived there   lived there   lived there   lived there  |       | ☐ Yes. Lis                         | t all of the places you l | ived in the last 3 years. Do n | ot include where you live nov  | V.                            |                      |
| States and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  |       | Debtor 1 Pr                        | ior Address:              |                                | Debtor 2 Prior Ad              | ddress:                       |                      |
| Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips   |       |                                    |                           |                                |                                |                               |                      |
| Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips   |       | ■ No                               |                           |                                |                                |                               |                      |
| 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips  |       | _                                  | ke sure you fill out Scl  | nedule H: Your Codebtors (C    | official Form 106H).           |                               |                      |
| 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips  | D(    | 9 F                                |                           |                                |                                |                               |                      |
| Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  No  Pebtor 1  Sources of income Check all that apply.  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Pebtor 2  Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$27,616.54  Wages, commissions, bonuses, tips   | Part  | Explai                             | n the Sources of You      | r Income                       |                                |                               |                      |
| Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  From January 1 of current year until the date you filed for bankruptcy:  Debtor 2 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$27,616.54  Wages, commissions, bonuses, tips  \$27,616.54  |       | Fill in the tota                   | I amount of income yo     | u received from all jobs and   | all businesses, including part | -time activities.             | ndar years?          |
| Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  From January 1 of current year until the date you filed for bankruptcy:  Debtor 2 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$27,616.54  Wages, commissions, bonuses, tips  \$27,616.54  |       | П Мо                               |                           |                                |                                |                               |                      |
| Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$27,616.54  Discreption of the date you filed for bankruptcy:   |       | _ '''                              | in the details.           |                                |                                |                               |                      |
| Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$27,616.54  Discreption of the date you filed for bankruptcy:   |       |                                    |                           |                                |                                |                               |                      |
| Check all that apply.  Check all that apply.  (before deductions and exclusions)  Check all that apply.  (before deductions and exclusions)  Check all that apply.  (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  \$27,616.54  \[ \begin{array}{cccccccccccccccccccccccccccccccccccc   |       |                                    |                           |                                | Crean income                   |                               | Cross in serve       |
| the date you filed for bankruptcy:  bonuses, tips  bonuses, tips   |       |                                    |                           |                                | (before deductions and         |                               | (before deductions   |
| ☐ Operating a business ☐ Operating a business  |       | the date you filed for hankruntcy: |                           |                                |                                |                               |                      |
|  |       |                                    |                           | ☐ Operating a business         |                                | ☐ Operating a business        |                      |

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Case number (if known) Document Debtor 1 Karen Castle

|     |  |  |  | Debtor 1   |  |  | Debtor 2  |   |   |
|-----|--|--|--|--|--|--|---|---|---|
|     |  |  |  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions<br>exclusions)  | and  | Sources of inco   |   | Gross income<br>(before deductions<br>and exclusions) |
|     | r last calen<br>nuary 1 to                       | dar year:<br>December 3                        | 31, 2017 )   | ■ Wages, commissions, bonuses, tips  | \$39,089   | 9.00   | ☐ Wages, common bonuses, tips   | nissions,                                 |   |
|     |  |  |  | ☐ Operating a business   |  |  | ☐ Operating a b   | ousiness                                  |   |
|     |  | dar year bef<br>December 3                     | 21 2016 \  | ■ Wages, commissions, bonuses, tips  | \$41,247   | 7.00   | ☐ Wages, common bonuses, tips   | nissions,                                 |   |
|     |  |  |  | ☐ Operating a business   |  |  | ☐ Operating a b   | ousiness                                  |   |
| 5.  | Include include and other winnings.  List each s | come regard<br>public benef<br>If you are fili | less of whethe<br>it payments; p<br>ng a joint case<br>ne gross incon  | during this year or the two r that income is taxable. Exa ensions; rental income; inter and you have income that y ne from each source separat   | amples of other income<br>est; dividends; money<br>ou received together,   | e are ali<br>collecte<br>list it or                | ed from lawsuits; r<br>nly once under De  | oyalties; and<br>btor 1.                  |   |
|     |  |  |  | Debtor 1   |  |  | Debtor 2  |   |   |
|     |  |  |  | Sources of income<br>Describe below.   | Gross income from each source (before deductions exclusions)   |  | Sources of inco   | ome                                       | Gross income<br>(before deductions<br>and exclusions) |
| Par | rt 3: List                                       | Certain Pa                                     | yments You N   | lade Before You Filed for I  | Bankruptcy   |  |   |   |   |
| 6.  | □ No.  | Neither De individual puring the No. Yes       | shor 1 nor De rimarily for a properties of the formation of the rimarily for a properties of the formation o | debts primarily consumer btor 2 has primarily consumer bersonal, family, or household be you filed for bankruptcy, distributed for bankruptcy, distributed for bankruptcy, distributed for an attorney for the primarily consumer by the primarily consumer for the prim | d you pay any creditor d a total of \$6,425* or ts for domestic suppor is bankruptcy case. s after that for cases fil mer debts. d you pay any creditor d a total of \$600 or mo | a total more in rt obliga led on c a total ore and | of \$6,425* or more pays ations, such as chi or after the date of of \$600 or more? | e? ments and the ld support a adjustment. | ne total amount you<br>nd alimony. Also, do           |
|     |  |  |  | his bankruptcy case.   | onganons, such as Chil   | iu suppi   | on and allinony. A  | 130, UU 110t I                            | noidue payments to an                                 |
|     | Creditor'  | s Name and                                     | Address  | Dates of payme   |  | unt<br>aid   | Amount you still owe  | Was this p                                | payment for   |

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| 7.  | Within 1 year before you filed for bankrupt Insiders include your relatives; any general p of which you are an officer, director, person in a business you operate as a sole proprietor. alimony.  | artners; relatives of any gencontrol, or owner of 20% | neral partners; partne<br>or more of their voting  | rships of which you securities; and a | ou are a genera<br>ny managing a | al partner; corporations<br>gent, including one for |
|-----|--|---|--|---------------------------------------|----------------------------------|---|
|     | <ul><li>No</li><li>☐ Yes. List all payments to an insider.</li></ul>   |   |  |                                       |                                  |   |
|     | Insider's Name and Address   | Dates of payment                                      | Total amount paid  | Amount you still owe                  | Reason for                       | this payment  |
| 8.  | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or contact to the second |   | yments or transfer a   | ny property on a                      | ccount of a d                    | ebt that benefited an                               |
|     | ☐ Yes. List all payments to an insider   |   |  |                                       |                                  |   |
|     | Insider's Name and Address   | Dates of payment                                      | Total amount paid  | Amount you still owe                  | Reason for<br>Include cred       | this payment<br>litor's name                        |
| Pai | t 4: Identify Legal Actions, Repossessio   | ns. and Foreclosures                                  |  |                                       |                                  |   |
| J.  | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.  Case title   |   |  |                                       |                                  | t or custody  |
|     | Case number  | riataro er ano suco                                   |  |                                       |                                  |   |
|     | Mariner Finance v. Karen Castle<br>17 M1 119582  | Summons   | Circuit Court of<br>County<br>Richard M. Dald<br>50 W. Washing<br>601<br>Chicago, IL 606 | ey Center<br>ton, Room                | ☐ Pending☐ On appe☐ Conclud      | eal   |
|     | Freedom Mortgage v. Karen Castle<br>aka Karen Castle-Millwood, Lester<br>L. Millwood<br>17CH8930   | Foreclosure   | Circuit Court of<br>County<br>Richard M. Dale<br>50 W. Washing<br>601<br>Chicago, IL 606 | ey Center<br>ton, Room                | ■ Pending □ On appe □ Conclud    | eal   |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.   |   | perty repossessed, f   | oreclosed, garnis                     | shed, attached                   | d, seized, or levied?                               |
|     | Creditor Name and Address  | Describe the Property                                 | •  | Date                                  |                                  | Value of the  |
|     |  | Explain what happene                                  | ed   |                                       |                                  | property  |
| 11. | Within 90 days before you filed for bankru accounts or refuse to make a payment bed No  Yes. Fill in the details.  |   | cluding a bank or fin  | ancial institution                    | n, set off any a                 | amounts from your                                   |
|     | Creditor Name and Address  | Describe the action th                                | e creditor took  |                                       | action was                       | Amount  |
|     |  |   |  | taker                                 | 1                                |   |

Case 18-20630 Doc 1 Filed 07/24/18 Entered 07/24/18 11:42:47 Page 49 of 72 Case number (if known) Document Debtor 1 Karen Castle 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of payment **Address** transferred or transfer was Email or website address made Person Who Made the Payment, if Not You 001 Debtorcc, Inc., **July 2018** \$14.95 Law Office Stuart B. Handelman **July 2018** \$400.00 200 S. Michigan, Suite 205

Chicago, IL 60604

www.chicagolandbankruptcy.com

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Debtor 1 Karen Castle

| 17.  | Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors or Do not include any payment or transfer that you lis  No Yes. Fill in the details.   | or to make payments to  |                               | pay or transfer any prope                                      | rty to anyone who                             |
|--|--|---|-------------------------------|--|---|
|  | Yes. Fill in the details.  Person Who Was Paid  Address  | Description and valu  | e of any property             | Date payment or transfer was made                              | Amount of payment                             |
| 18.  | Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already listed No  Yes. Fill in the details.                                    | ness or financial affairs<br>as security (such as the                 | ?                             |  |   |
|  | Person Who Received Transfer<br>Address<br>Person's relationship to you  | Description and value property transferred                            | paym                          | ribe any property or<br>nents received or debts<br>in exchange | Date transfer was made                        |
| 19.  | <ul> <li>Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are beneficiary? (These are often called asset-protection devices.)</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul> |   |                               |  | of which you are a                            |
|  | Name of trust  | Description and valu  | e of the property tran        | sferred  | Date Transfer was made                        |
| Par  | List of Certain Financial Accounts, Instru   | uments, Safe Deposit Bo   | oxes, and Storage Uni         | its  |   |
| <ul> <li>Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for you sold, moved, or transferred?         Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit houses, pension funds, cooperatives, associations, and other financial institutions.         </li> <li>No</li> <li>Yes. Fill in the details.</li> </ul> |  |   |                               |  |   |
|  | Name of Financial Institution and La   |   | ype of account or<br>strument | Date account was closed, sold, moved, or transferred           | Last balance<br>before closing or<br>transfer |
| 21.  | Do you now have, or did you have within 1 yea cash, or other valuables?  No  | r before you filed for ba   | nkruptcy, any safe de         | eposit box or other depos                                      | itory for securities,                         |
|  | Yes. Fill in the details.  Name of Financial Institution   | Who else had access   |                               | the contents   | Do you still                                  |
|  | Address (Number, Street, City, State and ZIP Code)   | Address (Number, Stree State and ZIP Code)                            | t, City,                      |  | have it?                                      |
| 22.  | Have you stored property in a storage unit or p  No  | olace other than your ho  | me within 1 year befo         | re you filed for bankrupto                                     | cy?   |
|  | Yes. Fill in the details.  |   |                               |  |   |
|  | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  | Who else has or had to it? Address (Number, Stree State and ZIP Code) |                               | the contents   | Do you still have it?                         |
|  |  |   |                               |  |   |

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Debtor 1 Karen Castle

| Par | t 9: Identify Property You Hold or Control for   | Someone Else   |                                       |                       |
|-----|--|--|---------------------------------------|-----------------------|
| 23. | Do you hold or control any property that someofor someone.   | one else owns? Include any proper  | ty you borrowed from, are storing fo  | r, or hold in trust   |
|     | ■ No □ Yes. Fill in the details.   |  |                                       |                       |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)   | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)    | Describe the property                 | Value                 |
| Par | t 10: Give Details About Environmental Informa   | ation  |                                       |                       |
| For | the purpose of Part 10, the following definitions  | apply:   |                                       |                       |
|     | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these substances. | ir, land, soil, surface water, ground                                      | - ·                                   |                       |
|     | Site means any location, facility, or property as to own, operate, or utilize it, including disposal   | _  | law, whether you now own, operate,    | or utilize it or used |
|     | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s  |  | s waste, hazardous substance, toxic   | substance,            |
| Rep | ort all notices, releases, and proceedings that yo   | ou know about, regardless of wher  | n they occurred.                      |                       |
| 24. | Has any governmental unit notified you that you  | u may be liable or potentially liable                                      | under or in violation of an environm  | ental law?            |
|     | ■ No □ Yes. Fill in the details.   |  |                                       |                       |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it     | Date of notice        |
| 25. | Have you notified any governmental unit of any   | release of hazardous material?   |                                       |                       |
|     | ■ No □ Yes. Fill in the details.   |  |                                       |                       |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it     | Date of notice        |
| 26. | Have you been a party in any judicial or adminis   | strative proceeding under any envi   | ironmental law? Include settlements   | and orders.           |
|     | ■ No □ Yes. Fill in the details.   |  |                                       |                       |
|     | Case Title Case Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code)    | Nature of the case                    | Status of the case    |
| Par | t 11: Give Details About Your Business or Con  | nections to Any Business   |                                       |                       |
| 27. | Within 4 years before you filed for bankruptcy, o  | did you own a business or have ar  | ny of the following connections to an | y business?           |
|     | ☐ A sole proprietor or self-employed in a t  | trade, profession, or other activity,                                      | either full-time or part-time         | -                     |
|     | ☐ A member of a limited liability company  | (LLC) or limited liability partnersh                                       | ip (LLP)                              |                       |
|     | ☐ A partner in a partnership   |  |                                       |                       |
|     | ☐ An officer, director, or managing execut   | tive of a corporation  |                                       |                       |
|     | ☐ An owner of at least 5% of the voting or   | equity securities of a corporation   |                                       |                       |

Case 18-20630 Doc 1 Filed 07/24/18 Entered 07/24/18 11:42:47 Page 52 of 72 Case number (if known) Document Debtor 1 Karen Castle No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Karen Castle Signature of Debtor 2 Karen Castle Signature of Debtor 1 Date July 24, 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). ☐ Yes. Name of Person

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

### (Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
  - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
  - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
    - To address income earned for services provided through confirmation, and to enable the Law Offices of Stuart B. Handelman P.C. to file the case thus providing the debtor with Bankruptcy Court protection.
  - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
  - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$400.00 toward the flat fee, leaving a balance due of \$3,600.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: <b>July 24, 2018</b>             | Sin to appear in court to coject. |  |
|--|-----------------------------------|--|
| Signed:                                |                                   |  |
| /s/ Karen Castle                       | /s/ Stuart B. Handelman           |  |
| Karen Castle                           | Stuart B. Handelman               |  |
|  | Attorney for the Debtor(s)        |  |
| Debtor(s)                              |                                   |  |
| Do not sign this agreement if the amou | ints are blank.                   |  |

**Local Bankruptcy Form 23c** 

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B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court**Northern District of Illinois

| In re | Karen Castle   |  | Case No.             |                       |                 |
|-------|--|--|----------------------|-----------------------|-----------------|
|       |  | Debtor(s)                                | Chapter              | 13                    |                 |
|       | DISCLOSURE OF COMPI  | ENSATION OF ATTOR                        | NEY FOR DE           | EBTOR(S)              |                 |
|       | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation   | ing of the petition in bankruptcy,       | or agreed to be paid | to me, for services 1 |                 |
|       | For legal services, I have agreed to accept  |  | \$                   | 4,000.00              |                 |
|       | Prior to the filing of this statement I have received  |  |                      | 400.00                |                 |
|       |  |  |                      | 3,600.00              |                 |
| 2.    | \$310.00_ of the filing fee has been paid.   |  |                      |                       |                 |
| 3.    | The source of the compensation paid to me was:   |  |                      |                       |                 |
|       | ✓ Debtor  ☐ Other (specify):   |  |                      |                       |                 |
| 4.    | The source of compensation to be paid to me is:  |  |                      |                       |                 |
|       | ✓ Debtor   |  |                      |                       |                 |
| 5.    | ✓ I have not agreed to share the above-disclosed con   | npensation with any other person u       | inless they are mem  | bers and associates   | of my law firm. |
|       | ☐ I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n   |  |                      |                       | law firm. A     |
| 6.    | In return for the above-disclosed fee, I have agreed to  | render legal service for all aspects     | of the bankruptcy c  | ease, including:      |                 |
|       | <ul> <li>a. Analysis of the debtor's financial situation, and rene</li> <li>b. Preparation and filing of any petition, schedules, st</li> <li>c. Representation of the debtor at the meeting of credit</li> <li>d. [Other provisions as needed]</li> </ul> | atement of affairs and plan which        | may be required;     | -                     | kruptcy;        |
| 7.    | By agreement with the debtor(s), the above-disclosed f Representation of the debtor(s) in any  |  | service:             |                       |                 |
|       |  | CERTIFICATION                            |                      |                       |                 |
|       | I certify that the foregoing is a complete statement of a pankruptcy proceeding.   | any agreement or arrangement for         | payment to me for r  | epresentation of the  | debtor(s) in    |
|       |  | /s/ Stuart B. Handelr                    | nan                  |                       |                 |
| I     | Date   | Stuart B. Handelm                        | nan                  |                       |                 |
|       |  | Signature of Attorney The Law Offices of |                      | elman, P.C.           |                 |
|       |  | 200 S. Michigan A                        | venue, Suite 205     |                       |                 |
|       |  | Chicago, IL 60604<br>(312) 360-0500 Fa   |                      | 3                     |                 |
|       |  | court@sbhpc.net                          |                      | <b>,</b><br>          |                 |
|       |  | Name of law firm                         |                      |                       |                 |

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
  - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
  - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
    - To address income earned for services provided through confirmation, and to enable the Law Offices of Stuart B. Handelman P.C. to file the case thus providing the debtor with Bankruptcy Court protection.
  - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
  - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000,00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$400.00 toward the flat fee, leaving a balance due of \$3.600.00; and \$0.00 for expenses, leaving a balance due for the filling fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: 7/24/50/8<br>Signed: /<br>Signed: / | 1/3/1                      |
|---|----------------------------|
| Karen Castle                              | Attorney for the Debtor(s) |
| Debtor(s)                                 |                            |

Do not sign this agreement if the amounts are blank.

Local Bankruptcy Form 23e

### IN THE UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

### DISCLAIMER: SET PAYMENT(S) and PAYMENT OF ATTORNEY'S FEES

At the time m Chapter 13 case will be filed, I, Karen Castle, will be past due/behind with mortgage payments to my mortgage company: Freedom Mortgage. The amount owed to the mortgage company at the time filing is referred to as "arrears" or "arrearage." The proposed chapter plan reflects arrears in the amount of \$15,254.57.

I am financing the 2012 Chevy Silverado, with OneMain ("VFC"). According to the contact with the VFC, we are supposed to pay VFC approx. \$602/mo. I understand that according to the proposed Chapter 13 plan there is a proposed interest rate of 5.75% to be paid on the secured claim of the VFC, which is in the amount of \$17.916.00.

I also have scheduled into my plan, payment on past due real estate taxes in the amount of \$887.26 per property -- there are 2 properties.

#### I understand that:

- The arrearage, the VFC & the past dues real estate taxes are scheduled to be paid through the Chapter 13 plan.
- After the Trustee takes his/her fee for administering our case each month (off the top of our plan payment/trustee payment), the arrearage owed to the mortgage company, the funds owed to the VFC, the past due real estate taxes and the attorneys' fees will be paid each month, concurrently/at the same time, based, in part, on set payments reflected in the Chapter 13 plan.
- The set payment to Freedom mortgage is \$100.00/mo.
- The set payment to the VFC is \$212.00/mo.
- The set payment to each of the past due real estate taxes is \$200.00/mo
- After the set payments to the mortgage company, the VFC, and the past due real estate taxes are made, the remaining balance of the trustee payment/plan payment will be applied to the balance of the attorney's fees.
- After the attorney's fees are paid in full, each month the Trustee will disburse (from my trustee payment) the set payments to the Freedom Mortgage (which will increase from \$100/mo to \$300/mo, then \$500/mo) and the VFC (which will increase from \$212/mo to \$412/mo, then later to \$612/mo), the remaining balance of the trustee payment will be disbursed to any priority debt, and later to the allowed unsecured creditors.

| Date 7/24/2018 | Signature Kau Cadf       |
|----------------|--------------------------|
|                | Print Name: Karen Castle |
|                | DATE:                    |
|                |                          |

By the time the attorney's fees are paid in full, the past due real estate taxes should also be paid in full.

I understand that (a) the mortgage company, VFC & the past due real estate taxes could get more money than the set payments per month, as referenced above, and (b) if the set payments were more than \$212/mo, \$100/mo and \$200/mo, the balances owed to each creditor would be paid off faster. To achieve this, the attorney's fees would have to get less money each month, thereby increasing the number of months it would take for the attorney fee balance to be paid in full.

I further understand that this means that IF my Chapter 13 case gets dismissed during my plan term (depending on when during the plan term, the case is dismissed), the arrearage owed to the mortgage company may not be paid in full. If the arrearage is not paid in full (by the time my case is dismissed), this means that the mortgage company is free to begin or pick-up where they last off with foreclosure on the real estate that secures the mortgage.

I also understand that IF my Chapter 13 case gets dismissed during our plan term (depending on when during the plan term, the case is dismissed), I may not be contractually current with my VFC. If the funds owed to the VFC are not paid in full (by the time my case is dismissed) and/or the contract is not deemed contractually current, this means that the VFC could attempt to repossess the subject vehicle based on a contractual installment default.

I further understand that this means that IF my Chapter 13 case gets dismissed during my plan term (depending on when during the plan term, the case is dismissed), the arrearage owed on the past due real estate taxes may not be pald in full. If the arrearage is not paid in full (by the time my case is dismissed), this means, in part, the county will continue assess interest on the past due amount and may at a later date, sell the taxes.

With this understanding, I agree to the set payments as set out in my proposed Chapter 13 plan.

Date 1/24/2018 Signature Karen Castle

Print Name: Karen Castle

DATE:

The Law Offices of Stuart B. Handelman, P.C. 200 S. Michigan Avenue, Suite 205 Chicago, IL 60504

### **United States Bankruptcy Court** Northern District of Illinois

| In re | Karen Castle  |   | Case No.   |    |
|-------|---|---|------------|----|
|       |   | Debtor(s)   | Chapter 13 |    |
|       | VERIFICATION OF CREDITOR MATRIX   |   |            |    |
|       |   | Number of   | Creditors: | 58 |
|       | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. |   |            |    |
| Date: | July 24, 2018   | /s/ Karen Castle  Karen Castle  Signature of Debtor |            |    |